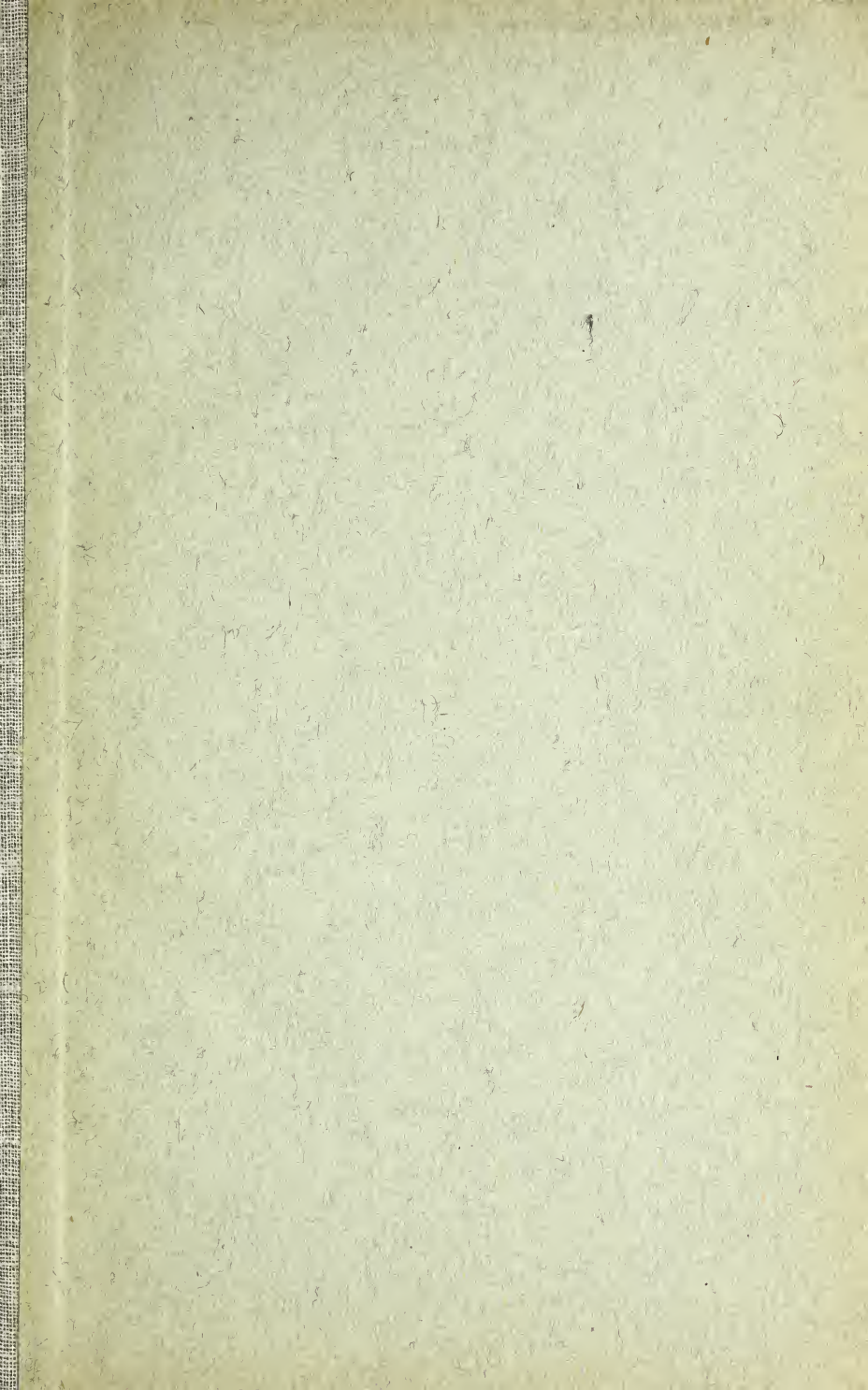


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The Bulletin

OF THE
ALUMNI ASSOCIATION
OF
RUSH MEDICAL COLLEGE

Vol. VI

OCTOBER, 1909

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The Bulletin

of the

ALUMNI ASSOCIATION OF RUSH MEDICAL COLLEGE.

Volume VI

October, 1909

No. 1

ALFRED N. MURRAY, Editor

100 State Street, CHICAGO, ILL.

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18309

TABLE OF CONTENTS

Original Articles—	PAGE.
a. Interaction of Serum and Leukocytes in a Case of Recurrent, Relapsing Erysipelas, Treated with Inoculations of Galactose-killed Homologous Streptococci....	3
b. Injections of Homologous Streptococci Killed by Galactose in the Treatment of Suppurative Complications of Contagious Diseases. T. Harris Boughton, '07....	7
College Notes	11
Alumni Notes	12
Clinics, Hospitals and Societies	15
Neurologist's Report	18
The Class of '69.....	27
Correspondence	33
Editorial Notes	34

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INTERACTION OF SERUM AND LEUKOCYTES IN A
CASE OF RECURRENT, RELAPSING ERYSIPELAS,
TREATED WITH INOCULATIONS OF
GALACTOSE-KILLED HOMOLOGOUS
STREPTOCOCCI.*

T. HARRIS BOUGHTON
(ALUMNI FELLOW)

This paper is an account of studies carried on in connection with a fatal case of erysipelas, complicated by otitis media, mastoiditis with considerable necrosis of the temporal bone and subdural abscess, acute endocarditis and pleurisy, in which six recurrences and four relapses occurred within a period of eight months, one of the recurrences and three of the relapses occurring within one month. The case was treated with injections of galactose-killed homologous streptococci, but with only temporary benefit. It was thought worth while to report this case in full because it presents some interesting and unusual points in regard to the opsonic index, and the phagocytic power of the patient's leukocytes in the presence of different serums, some of which points have been noted in other cases by a few other investigators, and some of which, it is believed, have not been previously recorded in the literature. Very briefly expressed, the main points are these: Patient's leukocytes may be considerably more or less actively phagocytic than normal leukocytes and this difference may be more marked in the homologous serum than in a foreign serum. This is one aspect of a three-sided specific relationship involving serum, leukocytes and bacteria. The addition of a small amount of normal serum to the patient's serum (in vitro) may greatly increase the phagocytic power of the patient's leukocytes in such a mixture, while not affecting normal leukocytes. (This is quite different from the reactivation of a heated serum.) The same thing may be accomplished by suspending patient's leukocytes for a time in normal serum and then washing and resuspending them in normal serum. Therapeutic injections of normal horse serum are not without danger in some chronic infections. The opsonic index may be higher for a virulent strain than for an avirulent strain of the same organism.

Wright and his followers have maintained that the only variable element in phagocytosis experiments was the serum, and that the

* This article is an abstract. A more complete account of this work is to appear in the next number of the Journal of Infectious Diseases.

source of the leukocytes was a matter of indifference. Other investigators in the last three years have shown that this position is not tenable, and that there are variations in the phagocytic power both of normal leukocytes, and of leukocytes from cases of disease. Rosenow¹ seems to have been the first one to point out a variation in the phagocytic power of leukocytes from cases of infectious disease, especially pneumonia. He found such leukocytes to be more actively phagocytic than normal leukocytes, independent of the condition of the serum. Other investigators have since confirmed these observations in the case of a few other diseases, and even in the case of normal leukocytes from different sources, but the subject has received little attention.

Ledingham² seems to have been the first one to point out that in certain diseases (he studied leukemia) the opsonic index may be lower when determined with the patient's leukocytes than when normal leukocytes are used; that is, the patient's leukocytes may be less active than normal when in their own serum, but fully as active, or more active than normal leukocytes when in normal serum. Bayly³ has found a similar condition in parturient women. Rosenow⁴ was the first one to show that this variation in the phagocytic power of leukocytes, especially in their own serum, might be specific for the infecting organism. This work tends to support that view. In one case he found that, although patient's leukocytes readily ingested bacteria either in their own or in normal serum, yet patient's leukocytes in patient's serum had no power to destroy the ingested bacteria; patient's leukocytes in normal serum, however, or normal leukocytes in patient's serum readily destroyed the bacteria.

Therapeutic injections of normal horse serum have been recommended in a number of cases by some authors, but the rationale of this method is not clear. Hort⁵ has claimed good results by such methods in cases in which ulceration or other destruction of tissue was a prominent feature. In this case I found that the phagocytic power of the patient's leukocytes in the patient's serum could be considerably raised by the addition (in vitro) of a small amount of fresh normal human or horse serum. Accordingly, he received two injections of normal horse serum, but, although in the first instance there was an immediate and remarkable improvement in the general condition of the patient, in both instances the administration was soon followed by a recurrence of the erysipelas.

The patient's history is as follows: Male, Irish, single, laborer. 32 years of age. First attack of erysipelas in April, 1908, facial

1. Jour. of Inf. Dis., 1906, Vol. iii, p. 683.

2. Aberdeen Univ. Studies, 1906, Vol. xxi, p. 321.

3. Lancet, April 11, 1908, p. 1073.

4. Jour. of Inf. Dis., 1909, Vol. vi, p. 275.

5. Lancet, Dec. 21, 1907, and Feb. 15, 1908; Brit. Med. Jour., April 11 1908, p. 860.

type. Second attack in October, 1908, facial, later migrating down the back. Recovery was soon followed by the development of an otitis media, which continued to discharge until May, 1909, when, following a recurrence, the discharge suddenly stopped. The third attack was in December, 1908, beginning in the affected ear and later extending down the back. The patient remained in the hospital constantly from this attack until his death (May 20, 1909). During the next four weeks three attacks occurred. It was at this time that the patient first came under observation, and I am indebted to Dr. Weaver and to Dr. Friedberg for the privilege of studying the case in their wards in the Cook County Hospital. Following this last attack streptococcus inoculations were begun, using the organism isolated from the patient's ear. Subsequently the patient had four recurrences and one relapse, making a total of six recurrences and four relapses. Two of these attacks began in the discharging ear and all of the others either on the cheek or on the nose. With the exception of the first, every attack assumed the migrating type. He received six injections of galactose-killed⁶ homologous streptococci, increasing from 50,000,000 to 500,000,000 cocci at a dose. The first two injections seemed to produce a favorable influence on both the local and the general condition, but the subsequent injections apparently produced no effect whatever. The injections did not prevent recurrences. The opsonic index following the first two injections rose from .36 to 2.5, but soon fell to about normal, and subsequently was not much influenced by the inoculations. Later in the disease the index remained low (.095 to .6). It was repeatedly observed that the index was lower when determined with the patient's leukocytes than when normal leukocytes were used. This was evidently dependent on some reaction between the patient's own leukocytes and serum, for the patient's leukocytes were practically normal when in normal serum but much less active when in his own serum. On a few occasions it was found that the patient's leukocytes were more active than normal leukocytes, even though the opsonic index was low, and these variations in phagocytic activity were shown to be specific for the patient's own organisms. The opsonic index was sometimes noted to be higher for a virulent than for an avirulent strain of the same organism. It was observed on several occasions that when the leukocytes showed very little activity in their own serum it was possible to raise them to practically normal by the addition of a small amount of normal serum, and that the same effect might be produced by subjecting the leukocytes to the action of normal serum and then washing and resuspending them in their own serum. This phenomenon is due, aside from the inherent reduction in phagocytic power of the leukocytes, to the lack in the patient's

6. See Weaver and Tunncliffe, Jour. of Inf. Dis., 1908, Vol. v, p. 589.

serum of some element necessary to phagocytosis, which is present in normal serum and in normal leukocytes, or else to the presence in this serum of some inhibitory substance specific for the patient's leukocytes (since it does not affect normal leukocytes) and neutralized by normal serum. I was not able to determine which of these views is the correct one.

Because of the fact that the opsonic index, with respect to the patient's own leukocytes, could be considerably raised by the addition of a small amount of normal human serum, and raised even higher by a small amount of normal horse serum, the patient was given 10 c.c. of fresh normal horse serum subcutaneously. Within a few hours he began to show a very remarkable improvement in his general condition, but the next day, although he still declared that he felt much better, his erysipelas recurred. At the time it was thought that the recurrence was a coincidence, and about five weeks later the injection was repeated. The next day he developed a severe attack of serum disease, his general condition became very much worse and on the sixth day the erysipelas recurred. It is impossible to avoid the conclusion that the serum was responsible for the recurrence in both instances and that, at least in certain chronic infections, horse serum is not without danger. One possible explanation of this unfortunate result was later reached when it was found that, although the addition of a small amount of horse serum raised the index for organisms that had been grown under ordinary laboratory conditions, it lowered the index for a freshly isolated strain which had been grown under conditions calculated to preserve its virulence.

CONCLUSIONS.

1. In this case no method of observation that was tried (laboratory or clinical) gives a satisfactory explanation of the downward course of the disease. Shortly before death the various local processes seemed to be improving—the patient had completely recovered from a severe attack of erysipelas about two weeks previously. There was a constant high leukocytosis, with about 90 per cent. of polymorphonuclear leukocytes, the variations in phagocytic power previously mentioned had quite disappeared before death and the opsonic index for organisms virulent to the patient was high.

2. Bacterial inoculations were without permanent benefit.

3. There was, in this case, a specific relationship involving serum, leukocytes and bacteria. The opsonic index may be higher for a homologous virulent strain than for an avirulent strain of the same organism.

4. The leukocytes may act differently in their own serum than in a normal serum. Variations in the opsonic power of the serum may occur independently of the leukocytes, but the variations in the phagocytic power of the leukocytes are not entirely independent of

the variations in the serum. The changes in the serum appear earlier and are more marked and more persistent than are the changes in the leukocytes.

5. In this case the low degree of phagocytosis exhibited at times by the patient's leukocytes, when in their own serum, has been due either to the lack of some element necessary to phagocytosis (but present in normal serum) or to some inhibitory substance specific for the patient's leukocytes, but neutralized by normal serum. Therapeutic injections of fresh normal horse serum, however, produced bad results, apparently because, while the addition of a small amount of normal serum may increase the opsonic power for avirulent organisms, it decreases the opsonic power for virulent organisms.

6. This activation of normal or immune serum by the addition of a small amount of some foreign serum (normal or immune) is quite different from the reactivation of a heated serum.

INJECTIONS OF HOMOLOGOUS STREPTOCOCCI KILLED BY GALACTOSE IN THE TREATMENT OF SUPPURATIVE COMPLICATIONS OF CONTAGIOUS DISEASES.*

T. HARRIS BOUGHTON
(ALUMNI FELLOW)

Ever since the treatment of infections by the injection of dead bacteria was first urged by Wright interest in this method has been great, but the early reports of brilliant results have not met uniform confirmation. There is on record, however, a sufficiently large number of cases in which good results have followed the use of bacterial inoculations to justify further study of this subject, although the number of cases in which the most careful use of these methods has failed to produce good results suggests the possibility that in a certain number of instances the good results obtained were merely coincident. Under such circumstances the careful study of a few cases would seem to be of more value than the routine treatment of a larger number, since there are a great many factors in each case, an inadequate appreciation of which might lead to unjustifiable conclusions.

The organisms used in this series of cases were killed by suspension in a 25 per cent. solution of galactose, because Levy, Blumenthal, and Marxer¹ and Weaver and Tunnicliff² have shown that

* This is an abstract. A more complete account of this work is to appear in the next number of the *Journal of Infectious Diseases*.

1. *Centraltbl. f. Bakt., Abt. I, Orig.* 1906, Vol. xlii, p. 265.

2. *Jour. of Inf. Dis.*, 1908, Vol. v, p. 589.

organisms killed in this way may be given in relatively large amounts without effect and that such administration is followed (in animals) by considerably more immunity than follows the injection of heat-killed organisms.

In a former series of cases Dr. Weaver and I studied the effect of injections of heterologous, galactose-killed streptococci in scarlatina and in erysipelas, with reference to their power (*a*) to prevent suppurative complications or to ameliorate the course of the disease when injected during the acute stage of the disease and (*b*) to modify the course of suppurative complications when administered later. Injections were given in 128 cases, and the following conclusions were reached:

1. The injection of polyvalent, heterologous streptococci, killed by chemically indifferent agents, during the acute stage of erysipelas, has no appreciable effect on the course of the disease. In cases running a prolonged course such injections appear to exert a favorable influence.

2. The injection of such streptococci during the early stages of scarlet fever does not prevent the later development of local streptococcus complications, although they may appear a little later in the disease.

3. The injection of such killed streptococci in scarlatina after local streptococcus complications have developed exerts considerable influence in hastening recovery. The later the complications appear, and the more chronic the complications are at the time of the injections, the better are the results following the injections. Of nine cases injected during the first week of the fever, only one showed prompt improvement, while of twenty-three cases injected later, ten (44 per cent.) showed prompt improvement.

4. Homologous streptococci are probably preferable for preparing the material for injection in protracted, chronic and recurrent cases of erysipelas, and in cases of scarlatina with local streptococcus complications.³

In order to study this matter further careful observations were made on a new series of cases comprising two cases of erysipelas and twelve cases of scarlatina, of which five were complicated by diphtheria, two by measles and one by measles, diphtheria and chickenpox. The cases were studied in the contagious wards of the Cook County Hospital, and grateful acknowledgment is hereby made to Dr. Weaver, Dr. Baum and Dr. Cameron for the opportunity. Only those cases were selected which, judging from our previous experience, were "favorable"; that is, cases in which a suppurative complication had become chronic and the acute stage of the disease had passed, or cases that were distinctly septic. The probable reason that acute injections so seldom show a favorable reaction to bacterial inoculations is that the body is already over-

3. Weaver and Boughton: Jour. of Inf. Dis., 1908, Vol. v, p. 680.

taxed in the production of antibodies, but in our experience "septic" cases constitute an exception to this rule. Only those cases were considered as benefited which showed a sudden, marked improvement within four or five days after an inoculation. In a few cases, in which two or more injections were given, it was particularly hard to judge the effect of treatment, as almost any rational method of treatment would surely show some improvement in two weeks' time. It was also noticed that in the case of scarlatina there was a marked tendency for suppurative complications to disappear about the sixth week of the disease, whether treated with inoculations or not. There is still another factor tending to confuse results. The cases reported in this series represent only about one-third of the cases for which vaccines were prepared, the other two-thirds, during the interval of six to ten days required to prepare the vaccine by this method, having either recovered completely or improved to such an extent that it was not thought advisable to inject them. If the entire series of cases (all of them well marked cases) had been inoculated with "stock vaccines" when first seen, even if the doses had not produced any effect whatever, there would have been at least 67 per cent. of good results that might have been erroneously attributed to the inoculations, and, adding the good results obtained in the fourteen cases of this series, there would have apparently been 82 per cent. of good results, a figure which is much too high when the real facts are considered. The cases in this series, then, are a selected group, which by comparison were refractory. Because of the various and confusing factors, great care was taken in observing the cases so that the results obtained could be interpreted correctly.

The doses used in this series ranged usually from 50,000,000 to 500,000,000 cocci, but the impression was received that the best routine dose to use was about 100,000,000 cocci. Sometimes it has been necessary to repeat the dose once or twice, and in such cases it was always necessary to make the subsequent doses considerably larger than the first. Nothing is to be gained by repeating the dose in less than five to ten days, and if the first dose has been large it may be advisable to wait two weeks or more.

Of the fourteen cases eight recovered completely while under observation, but in only five was the recovery due, apparently, to the inoculations. In the other three the aural discharge diminished gradually, and finally stopped completely about twelve days after the inoculations, but, in the absence of any sudden and well-marked improvement, it is better to consider them conservatively as not benefited. Of the six cases which did not recover completely while under observation, only two failed to show improvement, and one of these died the day after the inoculation, so that perhaps it is not fair to place any stress on this one. Of the entire fourteen cases, nine showed improvement following the injections and five did not

show improvement which could be ascribed to the injections, but of the five, three recovered under observation, one died the day after the injection and one was taken from the hospital a few days after the injection, while the discharge was still profuse; of the nine which showed improvement, one (Case 1) later became worse, apparently because of two large injections at short interval; one (Case 4) died four months later, the course of the disease during the latter part of the sickness being apparently uninfluenced, favorably or unfavorably, by the inoculations; one (Case 3) showed marked improvement after the first two injections, and later, although he continued to improve, the improvement was very slow and not plainly due to the inoculation; and in one (Case 11), although the improvement was quite marked early, the course was much disturbed by an intercurrent infection of chickenpox, which in several cases in our experience has invariably had the effect of making an existing aural discharge much more profuse and more resistant to treatment.

In the entire series of fourteen cases, then, which may be considered as more refractory than the average of cases of this class, we may fairly claim, as due directly to the inoculation, 36 per cent. cured, 28 per cent. improved and 36 per cent. uninfluenced by the treatment. No ready explanation is at hand why some of the cases should respond to early treatment, but not to later treatment, although they may go on to recovery, but apparently not influenced by the injections. On the other hand, some cases will not respond to the first or second injection, but will respond to later injections. In view of the generally accepted fact that acute infections, especially suppurations, do not usually respond well to bacterial inoculations, the behavior of cases of sepsis is without ready explanation. In seven cases (three in this series and four previously reported), in which injections were given in the presence of marked evidence of sepsis, prompt improvement (in one to three days) was noted in all but one, and that one was moribund when injected; another case that seemed moribund when injected showed a marked improvement the next day. In other cases in which the condition was not so marked the patients would often declare that they felt much better after an injection, and the improvement was not altogether psychic. This improvement in general condition was often noted to precede improvement in the local suppurative process by a day or two, and was sometimes present even when no change in the local condition could be detected. From purely anatomical considerations it is easy to see why a long-standing purulent discharge, especially one involving a bony cavity, as a mastoiditis or an otitis media, could not be expected to stop at once, no matter how much the bodily resistance might be raised. In connection with our observation as to the beneficial results obtained in septic cases it is interesting to note that in a recent article Hartwell, Streeter and

Green⁴ report a series of ninety-seven cases treated with bacterial inoculations, and the only group of cases in which very encouraging results were obtained was a group comprising eighteen cases of puerperal sepsis, of which fifteen were of streptococcal origin. They mention in detail six cases in which good results were apparently produced by the inoculations.

CONCLUSIONS.

The injection of homologous galactose-killed streptococci in local streptococcus complications of scarlatina and of erysipelas has in many cases a marked effect in hastening recovery. This series of fourteen rather refractory cases shows 36 per cent. of recoveries and 28 per cent. of improvements due, apparently, directly to the inoculations. The average initial dose should be about 100,000,000 cocci (galactose-killed). Large doses, especially if repeated at short intervals, are capable of producing harmful results.

The injection of small doses (50,000,000) of galactose-killed homologous streptococci appears to exert a favorable influence on septic conditions complicating scarlatina.

Some cases of streptococcus infection may show favorable results following a few early injections, while later injections appear to produce no reaction whatever.

This work was done in the laboratories of the Memorial Institute for Infectious Diseases, with the advice of Dr. Hektoen, to whom I wish to express thanks for many valuable suggestions.

COLLEGE NOTES.

The commencement exercises of the summer quarter occurred Sept. 3, 1909, in the college amphitheater. At this time eleven men received the degree of *Medicinæ Doctor*. Their biographies appeared in a former issue of *THE BULLETIN*, so that it will not be necessary to republish them here. With but one exception, these men hold degrees from recognized colleges, and all but one of them (an instructor in the U. of C.) have good hospital appointments.

The list of graduates is as follows:

Ibrahim Abadir,
John Henry Breyer,
Horatio Alford Brown,
Carl H. Davis,
Darwin Delap,
Charles Darwin Enfield,

Carl Floyd Hartman,
Edwin Garvey Kirk,
Charles Newberger,
Harrison Ross Rogers,
John William Thomson.

The number of registrations for the year 1909-10 shows no diminution over former years since the introduction of the quarterly system. In fact, it is somewhat larger than usual, the number this year for the summer and winter quarters being 189 Juniors

4. Surg. Gyn. and Obst., 1909, Vol. ix, p. 271.

and Seniors, as against 167 for the same quarters of last year. It is encouraging to note the continued preponderance of college graduates. This insures a personnel of the classes which makes membership in them more than ordinarily beneficial on account of the consequent association with earnest and intelligent men. To be a graduate of Rush in these days means infinitely more than it did in former days, when the standard of admission was not so high, although we all have reason to be proud of our Alma Mater, no matter what the year of graduation.

The Treasurer's report of the Class of '09 shows \$60 collected and \$51 expended, leaving a balance of \$9. This amount was turned over to the Librarian, who purchased with it a set of Bryant's Operative Surgery. Those still in arrears can send the amount to the Librarian.

ALUMNI NOTES.

Dr. Spencer S. Fuller of Paxton (Rush '02) has just returned from a trip to Europe.

Dr. Ruth Vail (Rush, '04) was married Sept. 7, 1909. Her name is now Mrs. Albert Taylor Snow. THE BULLETIN extends hearty congratulations.

Dr. William B. Wherry (Rush, '01) has been appointed Assistant Professor of Pathology and Bacteriology at the new Medical Department of the University of Cincinnati.

Mr. and Mrs. A. C. Schmidt, 4828 Sheridan Road, Chicago, announce the marriage of their daughter, Edna, to Dr. Alfred Nicholas Murray, on Sept. 30, 1909.

An interesting letter containing \$5 Alumni dues was recently received from Dr. James Henry Honan, who is at present located at Bad-Nauheim, Germany. Dr. Honan was the founder of the Anglo-American Medical Association of Berlin, and was for six years its president. He extends a cordial invitation to all Rush men to call on him should they visit Nauheim.

LUNCHEON OF THE MINNESOTA ALUMNI.

On Oct. 13, 1909, at the Winona Hotel, Winona, Minn., there was held the annual luncheon of the Alumni of Rush of the State of Minnesota. The occasion was the meeting of the State Medical Society, October 12, 13 and 14.

There were 26 Alumni who sat down to the table, including Dr. Linnell, '93, the representative of the college, who went for the purpose of being present at the luncheon.

Dr. F. W. Dimmitt, '81, Red Wing, presided. Dr. E. H. Bayley performed the duties of secretary.

After the luncheon, the president, Dr. Dimmitt, made a short address calling to mind the teachers left in college, who were there when he was a student. Only three were left, as he remembered.

He then introduced Dr. Linnell, who told the visiting Alumni of the various changes in the curriculum and standard of admission. He also spoke of some of the hopes and ideals of the institution.

The college and Dr. Linnell were thanked by a rising vote for the presence of one of the faculty at the meeting.

The annual election of officers was then held. J. W. Andrews, '77, Mankato, was elected president, and Dr. E. H. Bayley, '93, Red Wing, was reelected secretary. The oldest man present was Dr. Andrews, '77, the youngest, Dr. Tyrell, '02, Waterville; '96 was represented by 4 men (the largest class representation), Richardson, Palmer, Bullen and Heise.

Rush is well represented in Minnesota, and there were many Rush men on the program of the state meeting. An interesting discussion of the recent epidemic of acute anterior poliomyelitis in Minnesota filled the forenoon of Wednesday, Bullen, '96, reading one of the papers.

Dr. Heise, '96, Winona, was on the reception committee and made things interesting for the boys.

Dr. W. D. Sheldon, '95, has lately been put in charge of the medical end of the out-patient department under Dr. Green of the State University.

Dr. J. W. Andrews, '77, is chairman of the Committee of the State Society to bring about a revision of the laws in regard to the practice of medicine.

Dr. E. H. Bayley, '93, is the retiring president of the State Sanitary Society.

Dr. W. H. Cremer, '93, has just finished his term as mayor of Red Wing.

At the meeting were three doctors who had their arms broken cranking their cars. The latest victim was Dr. Carl J. Holman, '99, Mankato.

Almost every other alumnus has a flourishing hospital of his own, where he does his own surgery. Among these, Dr. Danilson, '00, Litchfield, must be mentioned as one of the youngest.

Dr. M. S. Wardner, '84, who is temporarily at Trempealeau, Wis., was a visitor at the luncheon.

The others present were doctors:

C. F. McComb, '79.....Duluth, Minn.	W. E. Richardson, '96.....Slayton
V. J. Hawkins, '81.....St. Paul	W. L. Palmer, '96.....Albert Lea
S. S. Jones, '81.....Frazee	H. P. Dredge, '96.Sandstone, Minn.
J. H. Adair, '83.....Owatonna	F. H. Rollins, '97.....St. Charles
Daniel Darrow, '84.....Moorhead	Anton J. Moe, '97.....Heron Lake
J. T. Bond, '85.....Wabasha	R. E. Farr, '00.....Minneapolis
A. J. Cox, '86.....Tyler	J. W. Andrist, '00.....Owatonna

THE RUSH ALUMNI DINNER AT THE MEETING OF THE INDIANA STATE
SOCIETY AT TERRE HAUTE.

(Reported by Bennet Caffee, M.D.)

To the Rush men who were present at the state meeting, the annual dinner was certainly the most pleasant and entertaining part of the entire program to them. It is probable that all the members of the alumni present at the meeting of the Association gathered together at the Fillbeck Hotel to talk over old and new times at the old school.

Dr. F. A. Tucker, the president of the Indiana Alumni, introduced or called on, rather—as he needs no introduction—Dr. John Dodson, who spoke of the conditions as they are at the present time, the great advance that has been made in medical teaching in the last few years, and especially at Rush since its affiliation with the university. He urged all graduates to stand by the institution and to aid in every manner possible in supporting it, but especially by sending students to the school.

Dr. E. T. Spotswood, a graduate of 1851, spoke very entertainingly of the difficulties of his trip from his home to Chicago, how the only means of conveyance available was his own horse, there being no railroad nor stage route at that time. He told of his staying over night in a lonely one-room cabin near the Kankakee, the only human habitation for many miles; of his kind reception by the early founders of the college; of their high-minded devotion to duty, and their consideration for the troubles and trials of the more impecunious students. The Doctor told too, of his early friendship with the “war governor” of Indiana, his being appointed regimental surgeon and the experiences of an army surgeon in the Civil War. His remarks were listened to with the closest attention and roundly applauded. At the conclusion Dr. Tucker expressed the sentiments of all those present when he said that Dr. Spottswood was an honor to the profession and to Rush.

Entertaining speeches were made by Drs. Beasley, Mattox, Somes, Breaks, and White. Dr. Simonds, of the Indiana State Board of Health Laboratory, urged the Alumni to take advantage of the opportunities of the laboratory.

The meeting closed with all those present greatly pleased with the experience and determined, if possible, to be present at the next annual dinner at Ft. Wayne.

The following is a list of those present:

F. A. Tucker, 1897, Noblesville, Ind., Presiding.

G. W. Beardsley, '64.....Lafayette	G. W. Brown, '86.....Frankfort
G. W. Thompson, '82.....Winimac	D. C. Shaff, '07.....Clinton
C. M. Casebeer, '93.....Newport	E. L. Mattox, '05...W. Terre Haute
L. F. Schmauss, '97....Alexandria	B. V. Caffee, '99.....Terre Haute
W. R. Mattox, '88.....Terre Haute	J. P. Simonds, '07....Indianapolis
J. F. Somes, '89.....Vincennes	C. K. Bruner, '86.....Greenfield

T. Z. Ball, '95.....Waveland	D. W. Stevenson, '91.....Richmond
F. E. Wiedemann, '94..Terre Haute	O. C. Neier, '90.....Indianapolis
J. E. Donnelly, '01....Terre Haute	B. S. Hunt, '94.....Winchester
D. B. Miller, '03.....Terre Haute	E. T. Spotswood, '51...Terre Haute
J. M. Harrah, '65.....Switz City	C. S. White, '71.....Danville
L. Z. Breakes, '01....Terre Haute	J. M. Dodson, '82.....Chicago, Ill.
E. B. McAllister, '94..Terre Haute	

CLINICS, HOSPITALS, AND SOCIETIES.

For the benefit of the members of the Alumni Association visiting Chicago, a list of Rush clinics is herewith appended. In addition thereto is given a list of some of the principal hospitals in the city, as well as the means by which they are reached, and the hours of their public clinics. There is also appended a list of various societies and their meeting places.

THE BULLETIN wishes to be perfectly impartial in this respect, giving not only information which directly concerns Rush Medical College, but any information which may be of interest to visiting Alumni. It will be glad at any time to furnish upon application further information regarding any clinic in Chicago.

CLINICS—RUSH MEDICAL COLLEGE.

MONDAY.

9:00-11:00—Prof. Frank Billings.....	Medicine
11:00- 1:00—Prof. Arthur Dean Bevan.....	Surgery
2:00- 4:00—Prof. James Nevins Hyde.....	Dermatology
3:00- 4:00—Prof. William H. Wilder.....	Ophthalmology
4:00- 6:00—Prof. William T. Belfield.....	Genitourinary

TUESDAY.

9:00-11:00—Prof. James B. Herrick (Cook County Hospital)...	Medicine
11:00- 1:00—Prof. John Ridlon.....	Orthopedic Surgery

WEDNESDAY.

9:00-11:00—Prof. Bertram W. Sippy (Cook County Hospital)...	Medicine
11:00- 1:00—Prof. J. Clarence Webster.....	Gynecology
2:00- 4:00—Prof. John Edwin Rhodes.....	Diseases of the Chest

THURSDAY.

9:00-11:00—Prof. Frank Billings.....	Medicine
11:00- 1:00—Prof. Arthur Dean Bevan.....	Surgery
2:00- 4:00—Prof. James Nevins Hyde.....	Dermatology

FRIDAY.

9:00-11:00—Prof. James B. Herrick (Rush).....	Medicine
11:00- 1:00—Asst. Professor Charles A. Parker.....	Surgery
2:00- 4:00—Prof. George E. Shambaugh.....	Laryngology and Otology
4:00- 6:00—Prof. William T. Belfield.....	Genitourinary

SATURDAY.

9:00-11:00—Prof. Bertram W. Sippy (Rush).....	Medicine
11:00- 1:00—Prof. J. Clarence Webster.....	Gynecology
2:00- 4:00—Prof. David W. Graham.....	Surgery

HOSPITALS.

AUGUSTANA—Lincoln avenue and Cleveland avenue.

Take the Lincoln avenue car to Cleveland avenue. Dr. Ochsner's surgical clinic daily, beginning at 7:45 a. m.

CHICAGO POLICLINIC—174 East Chicago Avenue.

Take Northwestern Elevated train to Chicago avenue station; or Wells street car to Chicago avenue, and walk one-half block west. Clinics all day, from 9 a. m. until 6 p. m., in all branches.

COOK COUNTY—Harrison and Honore streets.

Adams street car direct to entrance. Van Buren street car to Honore, two blocks south. Metropolitan Elevated (Garfield Park) to Ogden avenue. Clinics: See special schedule.

ILLINOIS CHARITABLE EYE AND EAR INFIRMARY—227 West Adams street.

Take Adams street car to Morgan street; or Madison street car to Morgan street and walk two blocks south. Clinics daily, from 1:30 to 3 p. m.

MERCY HOSPITAL—Calumet avenue and Twenty-sixth street.

Take Indiana avenue car to Twenty-sixth street, walk two blocks east; or Cottage Grove avenue car to Twenty-sixth street, walk two blocks west. Clinics: Wednesday and Saturday at 9 a. m., Surgery; Monday and Thursday at 8 a. m., Surgery; Tuesday and Thursday, from 10 a. m. to 12 m., Medicine.

MICHAEL REESE—Twenty-ninth street and Groveland avenue.

Take Cottage Grove avenue car to Twenty-ninth street and walk one block east. No special clinics, but hospital always open to doctors.

POST-GRADUATE SCHOOL—2400 Dearborn street.

Take State street car to Twenty-fourth street, walk one block west; or South Side Elevated to Twenty-second street, walk one block west and two south. Clinics all day, from 8:30 a. m. to 5:30 p. m., in all branches.

PRESBYTERIAN—Corner Congress and Wood streets.

Take Adams street car to Wood street; or Van Buren street car to Wood street and walk one block south. Clinics: See Rush.

ST. LUKE'S—1439 Michigan avenue.

Take any car on Wabash avenue to Fourteenth street, walk one block east and one-half block south. Clinics: Wednesday, 9 a. m. to 12 m., Gynecology; Thursday, 8 to 10 a. m., Surgery; Thursday, 2 to 5 p. m., Eye and Ear. Clinicians variable.

WESLEY—2440 Dearborn street.

Take State street car to Twenty-fifth street and walk one block west. Clinics: Tuesday, 8 a. m., Gynecology; Tuesday, 4 p. m., Surgery; Wednesday, 8 a. m., Medicine; Thursday, 4 p. m., Surgery; Friday, 10 a. m., Nose and Throat; Saturday, 9 a. m., Surgery.

SOCIETIES.

Time and place of meeting of the Chicago Medical Society, its branches and Affiliated Societies. Copied from *The Bulletin of the Chicago Medical Society*.

CHICAGO MEDICAL SOCIETY.—Northwestern University Building, Lake and Dearborn streets; every Wednesday evening at 8:30 o'clock (except July, August and September).

1. North Side Branch.—Red Star Inn, 1538 N. Clark street; 8:30 p. m., second Friday of month. Telephone North 3942.

2. North Shore Branch.—Bismarck Garden, N. Halsted and Grace streets; 8:30 p. m., first Tuesday of month. Telephone L. V. 633.

3. Evanston Branch.—Avenue House; 8:30 p. m., fourth Thursday of month. Telephone Evanston 1110.

4. Northwest Branch.—Northwestern University Settlement, Augusta and Noble streets; 9 p. m., first Friday of month. Telephone Monroe 1717.

5. West Side Branch.—Cook County Hospital; 8:30 p. m., second Monday of month. Telephone West 171.

6. Aux Plaines Branch.—Alternating between Oak Park Hospital and Maywood Hospital; 8:30 p. m., fourth Friday of month. Telephone O. P. 600 and Maywood 5.

7. Douglas Park Branch.—Gads Hill Center, Twentieth and Robey streets; 8:30 p. m., first Tuesday of month. Telephone Canal 963.

8. Stock Yards Branch.—Peoples Bank Building, Forty-seventh street and Ashland avenue; 9 p. m., first and third Thursdays of month. Telephone Yards 1575.

9. Englewood Branch.—Englewood Hospital, Sixtieth and Green streets; 9 p. m., first Tuesday of month. Telephone Wentworth 342.

10. South Side Branch.—Drexel Hall, Fortieth street and Cottage Grove avenue; 8:15 p. m., October 30, November 30, December 30, January 31, February —, March 29, April 30, May 31, June 30. Telephone Douglas 1609.

11. South Chicago Branch.—9154 Commercial avenue; 8:30 p. m., third Tuesday of month. Telephone S. C. 1077.

12. Northwest Suburban Branch.—Alternating between offices of Dr. Ferguson, Irving Park and Dr. Earle, Des Plaines; 4 p. m., second Monday of month. Telephones Irving Park 35, and Des Plaines 1.

13. Chicago Heights Branch.—93 Illinois street; 8:30 p. m., first Tuesday of month. Telephone C. H. 2124.

14. Calumet Branch.—11245 Michigan avenue; 8:30 p. m., second Thursday of month. Telephone W. P. 43.

CHICAGO GYNECOLOGICAL SOCIETY.—Northwestern University Building; 8 p. m., third Friday of month.

CHICAGO DERMATOLOGICAL SOCIETY.—Meeting place variable; 3:30 p. m., third Friday of month.

CHICAGO UROLOGICAL SOCIETY.—800 Schiller Building; 8 p. m., last Thursday of month. Telephone Central 1779.

CHICAGO LARYNGOLOGICAL AND OTOLOGICAL SOCIETY.—Great Northern Hotel, Parlor L 38; 8 p. m., second Tuesday of month. Telephone Harrison 7904.

CHICAGO MEDICOLEGAL SOCIETY.—Meetings subject to call of Executive Committee.

CHICAGO NEUROLOGICAL SOCIETY.—Bismarck, 180 East Randolph street; 8 p. m., fourth Thursday of month. Telephone Franklin 522.

CHICAGO OPHTHALMOLOGICAL SOCIETY.—Great Northern Hotel; 8 p. m., second Monday of month. Telephone Harrison 7904.

CHICAGO PATHOLOGICAL SOCIETY.—Northwestern University Building; 8 p. m., second Monday of month. Telephone Central 4486.

CHICAGO PEDIATRIC SOCIETY.—Meeting place variable, 8 p. m., third Tuesday of month. Telephone Harrison 7904.

CHICAGO ORTHOPEDIC SOCIETY.—Meeting place variable; 8 p. m., second Thursday of month.

CHICAGO SURGICAL SOCIETY.—Northwestern University Building; 8 p. m., first Friday of month.

NECROLOGIST'S REPORT.*

OLIVER S. ORMSBY, M.D.

It falls to my lot this year to assemble the records of our fellow-graduates whom we and the world at large have lost. It is now sixty-six years since Rush Medical College graduates began life as such, which is nearly the three score and ten years allotted to man. It is, therefore, only natural that each year a proportion finish their earthly labor.

Since our last meeting, one year ago, the number of deaths of our alumni is eighty-seven. In addition, our college has lost through death three members of its faculty.

The total number of graduates during the year, including those receiving degrees to-day, is seventy-five. Our total membership to-day is, therefore, less by twelve than it was one year ago.

It becomes my painful duty to record in this roll a colleague, a man for whom I had the highest personal regard, one who was respected and esteemed in the highest degree by every one who had the honor of his acquaintance. In the untimely death of Professor Frank Hugh Montgomery, Chicago lost a useful and honored citizen, the general medical profession a member who embodied the ideals it is striving to attain, and dermatology a loyal worker whose entire medical career was devoted to perfecting this special branch of medicine.

Daniel Roberts Brower,¹ M.S., A.M., M.D., LL.D., was born in Philadelphia, Oct. 13, 1839. His father was one of the early settlers of Montgomery County, Pa.; his mother was the daughter of a Major in the British army. Dr. Brower received a scientific education in the Polytechnic College of Philadelphia, from which he was graduated with honors as a Bachelor of Science. At that time he purposed becoming a mining engineer, and his graduation thesis was on the subject of "Ventilation and Drainage of Mines." This essay was later published in full in the *London Times*, and received favorable comment in the editorial pages of that sheet. He practiced his profession, however, as a mining engineer for only one year in Western Virginia, after which he determined to carry out an early desire to study medicine. Accordingly, after completion of his studies in that institution, he was graduated Doctor of Medicine at the Georgetown University, near Washington, D. C.

On the 18th of May, 1864, he entered the military service of the United States as First Lieutenant and Assistant Surgeon U. S. V. He was made Captain U. S. V. "for faithful and meritorious service" Oct. 28, 1865, and was mustered out of the service on Nov. 5 of the same year.

He served in United States General Hospitals, first, at Portsmouth, Va., March, 1864; next at Hampton, Va., in May, and last at Chesapeake, Va., in the autumn of the same year. During the spring and summer of the year 1865 he served as chief medical officer of the Military District

* The major part of the information recorded here was obtained from the Journal of the American Medical Association and the Illinois Medical Journal, throughout the year. To these journals I acknowledge my indebtedness. I regret that in some instances the data are so meager. In some instances additional information was furnished by the associates of the deceased.

1. In memoriam, Military Order of the Loyal Legion of the United States. James Nevins Hyde, Joseph B. Leake and Richard S. Tuthill, committee.

of Norfolk, Va., and in the year 1865 did duty as Inspector of Hospitals under the control of the Medical Bureau.

On the conclusion of his military service, in the year 1868, he was elected Medical Superintendent of the Eastern Lunatic Asylum in Williamsburg, Va., and he served in this capacity until the year 1875. As a result of the large experience thus acquired, he was led to devote his special attention to the diseases of the mind and nervous system.

In the year 1876 he came to Chicago with a view to practicing his profession in civil life, and accepted a position as assistant to a much younger man in connection with the Central Free Dispensary of Chicago, becoming later one of the visiting physicians for the same institution. The routine of this work was faithfully performed until the increasing demands of his private practice compelled him to relinquish an onerous task which had been throughout gratuitous. The knowledge, however, thus acquired by his associates in the profession, of the conscientious character of his work, his tireless energy, and his charming personality, led to his promotion to the professorship of Mental and Nervous Diseases in the Faculty of Rush Medical College, a position which he held until the time of his death, which occurred on March 1, 1909. At this time he held, in addition, the position of Neurologist to St. Joseph's Hospital and to the Presbyterian Hospital of the City of Chicago.

Dr. Brower was a member of the American Medical Association, of the Illinois State Medical Society, serving one term as its President; of the Chicago Medical Society, which he also served as President, and of the Physicians' Club, to the presidency of which also he was elected. For a number of years he edited the *Chicago Medical Journal*. For ten years prior to his death he served as a member of the Standing Committee of the Diocese of Illinois of the Protestant Episcopal Church, and for many years was also Senior Warden of the Church of the Epiphany.

On May 15, 1867, he was married to Eliza Anne Shearer, daughter of the late Col. A. W. Shearer, who survives him. Two children were born to them, Dr. Daniel R. Brower, who is an active and esteemed member of his father's profession, and Eunice Anne Brower.

At the time of his death, Dr. Brower had rounded out a useful and honorable career in his profession, and had stored his mind with the rich fruit of an enormous experience. In every relation of life, he commended himself to those with whom he was brought in contact by his fidelity to all responsibilities, by his loyalty to his conscience, by the valued fruits of his extensive training, and by a charm of disposition which won for him the love and favor of all who knew him.

Dr. Brower was elected an Original Companion of the Military Order of the Loyal Legion of the United States through the Commandery of the State of Illinois on Oct. 7, 1885.
(Insignia No. 3857.)

Ferdinand Carl Hotz, M.D., one of the oldest and best known ophthalmologists of Chicago, died March 21, 1909, from pneumonia, aged 65. He was born in Wertheim, Germany, and after study in Jena graduated in medicine from the University of Heidelberg in 1865. He served as surgeon in the South German Army during the Austro-Prussian war in 1866; during 1867 and 1868 he was assistant surgeon to Knapp's Eye Clinic, Heidelberg, and a year later came to the United States and located in Chicago. He has been ophthalmic surgeon to the Illinois Charitable Eye and Ear Infirmary since 1876; professor of ophthalmology in the Chicago Polyclinic since 1888, and professor of ophthalmology and otology in Rush Medical College since 1898, and oculist to Cook County and Presbyterian Hospitals. He was a member of the American Medical Association; one of the founders and once President of the Chicago Ophthalmological

Society. He was made a director of the Chicago Public Library in 1875 and held this position until his death. His contributions to ophthalmologic literature have been frequent and valuable.

"Dr. Frank Hugh Montgomery² was born in 1862, at Fairhaven, Minn. His early studies in the St. Cloud High School and the University of Minnesota were followed by a course at Rush Medical College and by postgraduate work at Johns Hopkins University and in the hospitals of Paris, London and Vienna. In 1897 he was married to Caroline L. Williamson; his wife and three children survive him.

"At the time of his death, July 14, 1908, Dr. Montgomery was associate professor of dermatology in Rush Medical College and dermatologist to the Presbyterian, the St. Elizabeth, the St. Anthony de Padua, and the Oak Park Hospitals; he was also an active member of the American Dermatological Association, in which he served a term as Vice-President and for three terms as Secretary; in the latter capacity he edited the transactions of the association for 1900-2. He also served as President of the Chicago Dermatological Society, taking an active part in all its meetings from the date of its organization. Aside from the treatise on diseases of the skin which bears Dr. Montgomery's name, and which has passed through several editions, he was known to the profession by his numerous scientific articles, each of which is characterized by scholarly thoroughness and by a wide knowledge of the literature of dermatology in all languages. Among his colleagues and his clientele Dr. Montgomery was recognized as an acute diagnostician, a skilful pathologist and practitioner, and a physician of singularly gracious personality.

"Besides his scientific affiliations, Dr. Montgomery was a member of the University Club, the Chicago Literary Club (of which he was Corresponding Secretary during 1906-7), the Quadrangle Club, and the Homewood Country Club; also of the Psi Upsilon and the Nu Sigma Nu fraternities. Although born and bred a Congregationalist, he was a pew-holder and regular attendant at St. Paul's Episcopal Church, Kenwood. He took a keen interest in the work of the South Park Improvement Association, and acted as chairman during the years 1902-4.

"In a time when specialization too often restricts the interests of scientific men, Dr. Montgomery was notable for the breadth and geniality of his sympathy with many sides of life. He was intensely fond of music, an enthusiastic mountain climber, an energetic promoter of civic good, a thoughtful student of educational questions. His loss is deeply felt among the colleagues who respected his ability, and yet more deeply by the friends who knew his daily life and character."

J. H. Crouse, M.D., born Dec. 30, 1843, at Dayton, Ind., died June 16, 1908. He was the son of Dr. David H. Crouse, one of the pioneer physicians of Indiana. At 18 years of age he enlisted in the Tenth Indiana Light Artillery, serving three years, receiving an honorable discharge Feb. 1, 1865, having served in the battles of Pittsburg Landing, Stone River, Chickamauga, Corinth, and Atlanta campaign. On his release from the army he entered Rush Medical College, graduating in 1867, after which he took a special course of lectures at Jefferson Medical College in 1868. He then entered his father's office and was associated with him in practice, continuing so until his death. The Crouses enjoyed an extensive practice and made continual successful efforts to keep up with the advance of medical progress. Dr. Crouse assisted Dr. Morris Baker of Stockwell, Ind., to perform the first Cæsarian section in the State of

2. Quoted from the University of Chicago Magazine, October, 1908. See also memorial address delivered by Prof. J. B. Herrick, The Bulletin of Rush Medical College, April, 1909.

Indiana. He was a Scottish Rite Mason, an Odd Fellow, a Presbyterian, and a staunch Republication. He was married to Sophia C. Bartman in 1868, she dying in 1869. In March, 1894, he married Miss Nina Nicily, who died a few years later. Dr. Crouse accumulated an estate of about \$50,000, which he divided mainly between his son and the Dayton Presbyterian Church.

A. B. Crawford, M.D., 1848, of Leoni, Mich., for some time postmaster and surgeon for the Detroit, Grand Haven and Milwaukee Railway at St. Johns, Mich.; first treasurer of Gratiot County; surgeon of the Eleventh Michigan Volunteer Infantry during the Civil War; died at the home of his daughter in Jackson, June 7, from cerebral hemorrhage, aged 80.

Washington Brenton, M.D., 1854, a pioneer practitioner of Tuscola, Ill., died at the home of his daughter in that city, January 28, from senile debility, aged 85.

Vernon Gould, M.D., 1855, assistant surgeon of the Eighty-seventh Indiana Volunteer Infantry during the Civil War, of Rochester, Ind., died at the home of his son in that city, March 17, from senile debility.

John J. Everhard, M.D., 1856, of Seneca, Kan., died at the home of his daughter in Duluth, Minn., August 27, aged 84.

John Randolph Webster, M.D., 1858; Jefferson Medical College, Philadelphia, 1864; a member of the American and Military Tract Medical Associations, who recently celebrated his fiftieth anniversary as a practicing physician of Monmouth, Ill., died at his home in that city, June 19, aged 72.

Charles Bunce, M.D., 1861, U. S. pension examining surgeon, died at his home in Hastings, Neb., July 11, aged 70.

Charles E. Allen, M.D., 1862, died at his home in Mason, Ill., June 10, aged 74.

William McKnight, M.D., 1862, for many years a practitioner of Granville, Ill., died at his home in Normal, Ill., October 16, from uremia,

George F. Heidemann, M.D., 1863, assistant surgeon of the Fifty-eighth Illinois Volunteer Infantry during the Civil War, coroner of Du Page County, Ill., for eight years, a member of the board of education of Elmhurst for sixteen years, and village treasurer, died at his home, September 29, aged 70.

Leonidas O. P. Wolfe, M.D., 1866, of Mauckport, Ind., died suddenly at the home of his brother in that place, March 30, aged 67.

Samuel Smith Troy, M.D., 1866, a veteran of the Civil War, and for more than forty years a practitioner of Chickasaw and adjoining counties in Iowa, died at his home in Waterloo, November 8, from cerebral hemorrhage, aged 76.

Dr. W. H. C. Moore, Rush Medical, 1867, passed away at his home at Essex, Iowa, Saturday afternoon at 5:30 o'clock, September 4. He was born at Hanover, Ill., March 9, 1841. He had his college training at Monmouth College; entered the medical department of the University of Michigan and received his medical degree at Rush Medical. He practiced two years at Savannah and two years at Canton, and in 1871 moved to southwestern Iowa. With the exception of a year at Denver, Colo., he practiced his profession in and about Essex until three years ago, when, on account of sickness, he was compelled to retire from active work. His remains were interred at Maquoketa, Iowa. He leaves a wife and six children.

William H. Christie, M.D., 1868, a member of the American Medical Association and the Medical Society of Missouri Valley; professor of *Materia Medica* and Therapeutics in the Medical College of the University of Nebraska; physician to Immanuel and Clarkson Memorial Hospital, Omaha; a veteran of the Civil War and a member of the local board of United States Pension Examining Surgeons; for six years a member of the Omaha school board; died at his home, May 28, of cerebral hemorrhage after a short illness, aged 64.

William Monroe, M.D., 1869, a prominent citizen of Monroe, Wis., a veteran of the Civil War and Black Hawk War, died at his home in Monroe, July 3, of paralysis, aged 90.

George Green, M.D., 1870, of Aurora, Ill., died at the home of his sister in Waltham, Mass., January 9, from typhoid fever complicating pneumonia, aged 74.

John Austin Thompson, M.D., 1870, died at his home in Letts, Iowa, March 24, aged 70.

Frank L. Lewis, M.D., 1870, formerly of Green Bay, Wis., and Beatrice, Neb., died at his home in Fayetteville, Ark., from nephritis, October 30, aged 67.

Melchert H. Garten, M.D., 1871, one of the most prominent and beloved practitioners of Lincoln, Neb., died suddenly at his home in that city from angina pectoris, May 6, aged 63. He was born in Springfield, Ind., and graduated from De Pauw University before taking up his medical work. For twelve years after his graduation he practiced in Dover, Ill., and then moved to Lincoln, Neb., where he soon attained a leading position as a specialist in diseases of the eye, ear, nose and throat. He was a member of the American Medical Association, and always an active and earnest member of the state and county societies. He was an ideal husband, father and friend, modest and retiring, unostentatiously liberal in his benefactions, especially in aiding struggling students to obtain an education. He had been in attendance at the annual meeting of the State Medical Society in Omaha, where he complained of indigestion, which proved to be angina pectoris.

David Theodore Douglas, 1871. He was born in Morristown, N. J., July 21, 1842; came to Illinois October, 1866; graduated from Rush Medical College February, 1871. Eastern McLain County was his field for practice, with residence at Colfax since 1883; died at the home of his brother in Morristown, N. J., Feb. 5, 1909, from an attack of angina pectoris.

Henry A. Given, M.D., 1871, a member of the Nebraska State Medical Association, died at his home in Wymore, April 18, from diabetes, aged 62.

John Newland Starr, M.D., 1873, a member of the Washington State Medical Association, formerly of Wilbur, Wash., died suddenly from heart disease at his home in Toppenish, Wash., in January, aged 69.

George Warren Reynolds, M.D., 1873, a member of the Illinois State Medical Society, died at his home in Chicago, October 5, from tuberculosis.

George W. Haines, M.D., 1876, died suddenly in his office in Maynard, Iowa, October 14, from pulmonary hemorrhage, aged 57.

John Brand Young, M.D., 1876, died at his home in Golconda, Ill., October 12, aged 65.

George K. Tillotson, M.D., 1876, of Chicago, died in Lakeside Hospital, July 2, from septicemia, after an illness of two weeks, aged 58.

Frank W. Epley, M.D., 1877, of New Richmond, Wis., was found dead in a cistern in New Richmond, September 28, aged 51.

Joel Wallace Whitmire, M.D., 1877, a member of the Illinois State and Livingston County Medical Societies, a local surgeon to the Wabash System and Toledo, Peoria & Western Railway, and a member of the County Board of United States Pension Examining Surgeons, died at his home in Forrest, Ill., June 1, aged 56.

William Lloyd Smith, M.D., 1878, for twenty years surgeon, with rank of Major, in the Illinois National Guard; division surgeon for all railroads entering Streator, Ill., and attending surgeon to the Chicago & Alton Railroad for eighteen years; president of the local board of health, and twice deputy coroner of La Salle County, died in the Streator Hospital, May 22, from spinal disease due to an injury sustained in 1906, aged 54.

Robert Morris Gibbs, M.D., 1879, an ornithologist and entomologist of repute; professor of natural science in Kalamazoo College for several years, died at his home in Kalamazoo, September 18, from paralysis, after an invalidism of twenty-one years, aged 52.

Orson Dorcelia Benson, M.D., 1879, of Omaha, died in a hospital in that city, January 15.

Joseph A. Muenich, M.D., 1879, died at his home in Jefferson, Wis., January 7, from cerebral hemorrhage, aged 64.

James Wallace, M.D., 1879, of Newport, Ind., a member of the Indiana State Medical Association; a member of the Local Board of U. S. Pension Examining Surgeons, died at the home of his sister in Cayuga, Ind., January 18, from cancer of the prostate and intestines, aged 59.

Theodore Parker Crosse, M.D., 1879, a member of the State Medical Society of Wisconsin, died at his home in Sun Prairie, April 20, from erysipelas, aged 53.

Elwyn Ashworth Holroyd, M.D., 1879, died at his home in Chicago, May 13, from hemorrhage of the lungs, due to pulmonary abscess, aged 57.

Allen Vinton Smith, M.D., 1880, assistant surgeon of the Eighth Ohio Infantry, U. S. V., during the Spanish-American War; a member of the Association of Military Surgeons of the United States; visiting surgeon to the Aultman Hospital, Canton, and a member of the city council and health officer of Canton, died at his home in that city, April 10, from heart disease, aged 53.

Joseph M. Dicus, M.D., 1880, of Streator, Ill., a member of the American Medical Association, died in St. Mary's Hospital, Streator, November 1, a week after an operation for appendicitis, aged 56.

J. Nathaniel Henry Huggins, M.D., 1880, a member of the State Medical Association of Texas, and a Confederate veteran, for several years city physician of Georgetown, died at his home, November 29, aged 76.

David T. Stewart, M.D., 1881, of Hartley, Iowa, a member of the Local Board of U. S. Pension Examining Surgeons; a member of the Association of Surgeons of the Chicago, Milwaukee & St. Paul and the Chicago & Rock Island railways, died suddenly, December 26, from heart disease, while returning from a professional call, aged 59.

George W. Bronson, M.D., 1881, died at his home in Streator, Ill., March 31, from cerebral hemorrhage, aged 55.

Harrison Allison Winters, M.D., 1881, of Chattanooga, Tenn., died at the Erlanger Hospital in that city, March 7, from the effects of a fracture of the femur in June last, aged 55.

William H. Smethers, M.D., 1881, a member of the American Medical Association and Pan-American Medical Congress, died suddenly at his home in Moline, Kan., June 13, aged 51.

Michael C. Moran, M.D., 1882, died at his home in Chicago, January 25, from heart disease, aged 56.

Dyer D. Webb, M.D., 1883, a member of the Illinois State Medical Society, for thirty years a practitioner of Hoopston, Ill., died at his home in that city, August 24, from malignant disease of the neck, after a long illness, aged 57.

John Lincoln Gardner, M.D., 1883, a member of the American Medical Association, died at his home in Rochelle, Ill., January 15, from pneumonia, aged 53.

Robert S. Albright, M.D., 1884, died at his home in Beatrice, Neb., April 19.

Alexander Rixa, M.D., 1884, of New York City, died in Lebanon Hospital, New York City, March 16, from carcinoma of the rectum, aged 65.

William Wilson Hamilton, M.D., 1884, died at his home in East Liverpool, Ohio, August 5, from nephritis, after an illness of more than two years, aged 46.

John Charles Fremont Thorne, M.D., 1884, a member of the Indiana State and Howard County Medical Societies; mayor of Kokomo in 1892, died at his home, May 24, from brain disease, three years after a collision between his buggy and a street car, in which he received severe injuries of the head, aged 50.

David W. Mathews, M.D., 1884, formerly of Savanna, Ill., surgeon of the Colorado Fuel & Iron Company at Walsenburg, Colo., died at the Minnequa Hospital, Pueblo, Colo., July 22, from typhoid fever, aged 47.

Robert A. Holyoke, M.D., 1885, and once coroner of Lancaster County, was found dead in his room in a hotel in Chicago, January 31.

William Lancelot Downing, M.D., 1885, of Minneapolis, Minn., died in a sanitarium at Kenilworth, Ill., recently, aged 45.

James Benjamin McGinley, M.D., 1885, died at his home in Chicago, May 19, after a long illness, aged 47.

James A. Lydston, M.D., 1885, formerly professor of chemistry in the College of Physicians and Surgeons, died suddenly at his home in Chicago, July 6, from the effects of the heat, aged 47.

Charles McCutcheon, M.D., 1886, a member of the American Medical Association; for seventeen years resident physician and superintendent of the Fannie C. Paddock Memorial Hospital, Tacoma, Wash., formerly President of the Washington State Medical Association, one of the best-known practitioners of the north Pacific coast, died suddenly at Tacoma, August 10, from accidental poisoning by methyl salicylate, taken in mistake for sodium salicylate, aged 46.

Otto E. Haering, M.D., 1886, a member of the Illinois State Medical Society, died at his home in Bloomington, October 10, from tuberculosis, aged 47.

William A. Tope, M.D., 1887, of Downers Grove, Ill., died December 11, in Albuquerque, N. M., where he had gone in the hope of bettering his health.

John Ransom Hamill, M.D., 1887, a member of the Oklahoma State Medical Association; formerly professor of ophthalmology in the Chicago Clinical School, a specialist in diseases of the eye and ear, died at his home in Guthrie, September 25, from typhoid fever, aged 44.

Thomas Gregory Walsh, M.D., 1887, a member of the medical staff of the Emergency and St. Mary's Hospitals, Milwaukee; attending physician to St. Vincent's Infant Asylum, died at his home, October 25, from nephritis, aged 47.

Howard L. Power, M.D., 1888, formerly of Brower, Ore., died in Marlin, Texas, October 23, from typhoid fever, aged 46.

John S. Stockwell, M.D., 1888, a member of the American Medical Association; township physician and for several years town health officer, died suddenly at his home in Charlestown, Ind. January 6, from angina pectoris, aged 61.

George H. Grant, M.D., 1888, a member of the American Medical Association and Mississippi Valley Medical Association; lecturer on surgery in Indiana Medical College and trustee of the Central College of Physicians and Surgeons; surgeon to the C., C. & L. and Erie railroads; President of the Indiana State Medical Association in 1905 and 1906; a member of the medical board of Reid Memorial Hospital, Richmond; health officer of Wayne County; physician to the Home for Aged Women and the Lutheran Orphan Asylum, while despondent on account of ill-health, is said to have shot and killed himself in his home in Richmond, September 21, aged 42.

George M. McKenny, M.D., 1889, of Oregon, Ill., a member of the American Medical Association, died in Amarillo, Texas, March 23, from ptomain poisoning, aged 44.

James S. McNeel, M.D., 1889, a member of the State Medical Society of Wisconsin, died at his home in Waterloo, June 20, from cerebral hemorrhage, after an illness of several days, aged 67.

Anthony White, M.D., 1890, of Excelsior Springs, Mo., died April 20, aged 62.

Joseph Greenberry Wolfe, M.D., 1890, a member of the American Medical Association; professor and head of the department of pediatrics in the Chicago College of Medicine and Surgery, and physician to the Frances E. Willard Hospital, died from nephritis in that institution, January 28, five days after an operation for tonsillectomy, aged 48.

Ira Gordon Stone, M.D., 1890, a member of the American Medical Association, and President of the Kingfisher County (Okla.) Medical Society; mayor of Kingfisher, 1905 to 1907, died in St. Francis' Hospital, Wichita, Kan., December 31, after an operation for cholecystitis, aged 54.

J. S. Sorenson, Shiocton, 1890, died October, 1908.

Joseph J. Crowe, M.D., 1893, of Chicago, died at the home of his father, September 14, from pulmonary tuberculosis, aged 40.

Joseph W. Kelly, M.D., 1894, died at his home in Hudson, Wis., December 2, from pneumonia, aged 38.

Haywood B. Bartholomew, M.D., 1895, a member of the American Medical Association; a member of the staff of the City and County Hos-

pital, Denver, died suddenly at his home in Denver, from uremia, August 24, aged 38.

Otis Sylvanus Hutchins, M.D., 1896, a member of the Minnesota State Medical Association and Yellow Medicine County Medical Society, died at his home in Canby, Minn., May 8, from septicemia, due to an operation wound, after an illness of ten days, aged 37.

Michael N. Regent, M.D. Bennett College of Eclectic Medicine and Surgery, Chicago, 1888; Rush Medical College, Chicago, 1896, died at his home in Chicago, June 5, from ptomain poisoning, after a short illness.

Nathan Monroe Dodson, M.D. Rock Island (Ill.) Medical College (now Keokuk, Iowa, Medical College), 1850; M.D. ad eundem, Rush Medical College, Chicago, 1896; a member of the State Medical Society of Wisconsin and its president from 1883 to 1884; for many years a member of the American Medical Association and of the Daniel Brainerd Medical Society; for nearly thirty years superintendent of the public schools of Berlin, Wis., and actively interested in the educational affairs of the state; a practitioner in Berlin for nearly fifty-seven years, died at his home, July 19, from cerebral thrombosis, aged 82.

Arthur G. Randolph, M.D., 1899, a member of the Missouri State Medical Association; formerly surgeon to the Missouri Lumber and Mining Company, Grandin, and medical examiner for the C., B. & Q. Railway, died at his home in Kansas City, Mo., November 8, aged 32.

C. E. Medill, 1899, Persia, Iowa, died of tuberculosis.

A. N. Chamberlain, M.D., 1899, Garnet, Montana.

Francis Jacob Gish, M.D., 1900, a member of the Colorado State Medical Society, died at his home in Olathe, September 17, from brain tumor, aged 32.

Alvin G. Fritsche, M.D., 1901, of Black Hawk, Wis., died at the Augustana Hospital, Chicago, July 13, five weeks after an operation for appendicitis, aged 30.

Henry Benjamin Cragin, Jr., M.D., 1901, of Chicago, died in a hospital in that city, May 27, 1908, from cerebral meningitis, aged 30.

John W. Davis, M.D., 1902, of Defiance, Ohio, died at the Oakes Home, Denver, January 7, from tuberculosis, aged 31.

Howell Emolyn Davies, M.D., Rush Medical College, Chicago, 1902; a member of the American Medical Association; fellow in bacteriology, University of Chicago, 1897-1900; and instructor in gynecology in his alma mater in 1902 and 1903; died at his home in Emporia, Kan., August 26, from typhoid fever, aged 38.

Louis C. Jacobson, M.D., 1903, formerly of Elroy, Wis.; a veteran of the Spanish-American War; a member of the Michigan State Medical Society; acting assistant surgeon, U. S. Navy; on duty at the Norfolk (Va.) Naval Hospital, died in the King's Daughters' Hospital, Portsmouth, Va., July 20, from typhoid fever, after an illness of three weeks, aged 29.

Theodore Clarence Haecker, M.D., 1903, of Chicago, died at the Frances E. Willard Hospital in that city, February 6, from pneumonia, aged 36.

Orville Augustus Olson, M.D., 1903, of Axtell, Neb., was instantly killed in a railway accident between Dotsero and Spruce Creek, Colo., January 15, aged 32.

C. E. Ingbert, M.D., 1904, Chicago, died of pernicious anemia.

Thomas M. Wilson,³ M.D., Rush Medical College, 1906; a B.Sc. of the University of Toronto; and about to receive the degree of Ph.D. from the University of Chicago; an interne in the Presbyterian Hospital, and instructor in pathology in the Chicago Veterinary College; who had devoted all of his leisure for a year past to experiments in the laboratories of the McCormick Memorial Institute in an attempt to produce a serum to counteract the effect of bacillus of glanders, died November 19, in the Presbyterian Hospital, from glanders, after an illness of three weeks, aged 38, a martyr in the cause of scientific research.

A. P. Johnston, M.D., 1907.

From the above record one sees that sixteen lived to be more than 70 years of age. The chief causes of death were nephritis, cerebral hemorrhage, heart disease, typhoid fever, tuberculosis, appendicitis and cancer. Eight are recorded as dying suddenly.

THE CLASS OF '69

SYNOPSIS OF REUNION OF THE FORTY-YEAR VETERANS.

CHICAGO, Jan. 22, 1909.

H. H. KLEINPELL.

Dear Doctor:—I took my examinations in Rush Medical College with the '69 class. We have never had a reunion, and being invited this year, I will be glad to assist in any way that I can to make the affair creditable to us and to our Alma Mater.

RAYMOND L. LEONARD.

CHICAGO, March 5, 1909.

R. L. LEONARD.

Dear Doctor:—Very much pleased at the interest you are taking in the events of "Good Old Rush," and especially of the Class of '69. Enclosed please find mailing list; notify as many of your classmates as possible of the reunion to be held about June 8.

HENRY H. KLEINPELL.

THE INVITATION.

CHICAGO, April 13, 1909.

Dear Doctor:—To me has been assigned the pleasant duty of writing to each fellow-member of the Class of 1869 in Rush Medical College, and invite, yea, solicit, the pleasure of his presence at the class reunion to be held in Old Rush about June 8, 1909. One hundred and eighteen students passed the examination for the

3. See memorial address delivered at Rush Medical College by Dr. David John Davis, *The Bulletin*, April, 1907.

degree of M.D. in that year, of which we find but forty-six upon the present mailing list of the Alumni Association; it certainly seems fitting that we who are left should all respond when invited to meet, enjoy the renewal of the friendships of long ago and whatever program may be arranged for that occasion.

The pleasant summer time is better for us of the older classes to travel, and it is hoped that a goodly proportion of our colleagues will make an effort to be present. May we expect you? Do try to be with us; it is really the first meeting of our class, and it will not only be a pleasure to you and to your colleagues of the old college days when we were boys together, but will be a most gratifying and pleasant scene for the faculty of our dear old Alma Mater to witness the students of that early day assembled in a class reunion, exchanging reminiscences of forty years passed in the practice of our learned profession, and after the entire teaching faculty of our student days have passed away. As soon as the responses are in, you will receive further data, and in time an outline of the program.

Please reply promptly; tell us how you are standing the rigors of our winter and spring weather, and whether we may expect you to be present at the reunion. Very truly yours,

RAYMOND L. LEONARD, Class of '69.

THE REPLIES.

TABLE IRON, ILL., April 20, 1909.

Forty-six is a good many out of 118, considering age; some of us must be along in years. "Yis; bress your soul, honey, I'll be 'dar on de' first seat, sure."

JAMES BAKER.

WOODWARD, IOWA, May 1, 1909.

I took a little photo album out of my desk, and on looking at R. L. Leonard—yes, that is the young familiar face in the halls of Rush forty years ago. Many pleasant reminiscences of those days come vividly to my mind, and I lived college days over again. Yes, I will certainly endeavor to meet my colleagues on this occasion.

DAVID J. BROOKINGS.

ROCKFORD, ILL., April 17, 1909.

Your kind invitation is received and accepted. I will then be 67 years old, in good health and a votin' for Old Rush.

R. BROUGHTON.

DECATUR, ILL., April 17, 1909.

I will be pleased to attend the reunion of the '69 boys. I have been in continuous practice ever since leaving Rush, and am now in the best of health.

C. CHENOWETH.

GEORGETOWN, ILL., May 8, 1909.

I think now that if the great Creator spares me, I shall surely be present with you.

J. P. CLOYD.

DETROIT, MICH., April 22, 1909.

If possible I will be there. "Forty Years," how soon gone and when to come, oh, so long. I wish you a large success and a happy meeting.

WILLIAM DUNLAY.

AURORA, ILL., April 22, 1909.

I will certainly be there, and it will be a great pleasure to again look into the faces of our classmates. With all the changes we will still see reflected from each eye and face Old Rush strength of character. I am enjoying fine health, 65 years old, and quite well satisfied with life.

F. M. ELLIOTT.

PARK RIDGE, ILL., April 21, 1909.

I will try to be on hand June 1. I hope to meet many of the old-timers. I have met but few of our class since we graduated.

G. H. FRICKE.

WINNEBAGO, WIS., April 17, 1909.

I am pleased to receive notice of the reunion of the Class of '69, and will be there if possible for me to do so. Am in fairly good health and actively engaged in the duties of the profession.

W. A. GORDON.

Dr. Gordon was taken ill and sent the following: Your reunion of the fortieth anniversary finds me on my back, so that the probabilities are that I will not be able to attend the reunion, which would have been the time of my life. If any of the class remember me, tell them it gives me a fierce pang not to be able to be present.—W. A. G.

SPRINGFIELD, MO., April 20, 1909.

It is with unfeigned regret that I must deny myself the pleasure of once more meeting the boys of '69. It is hard to realize that forty years have flown since we received our diplomas, starting out on our career with brighter hopes and anticipations for the future, and that so few of us are left to meet whatever of good or ill yet awaits us. How vividly does your letter bring to memory faces long forgotten and characteristics peculiar to many. J. Adams Allen, a favorite with all the students, kindly and sympathetic, ready at any time to defend Rush or "his boys"; Rea, the anatomist, intolerant of shirking on the part of any of us, pleased at proficiency, keen at satire, and how his snapping eyes flashed, and how like a bullet would "next, next, next" come out when a student missed some simple question in quiz; Gunn, Blaney, Freer, Miller, Powell, Holmes—all come up with startling clearness. All I suppose have gone to their reward and resting beneath the shade.

Remembering the Class of '69 as I do, I am sure it has well sustained its part in making the name of dear Old Rush respected throughout this fair land of ours. To be known as a Rush man is at once to demand respect and confidence.

Thanking you for the invitation and praying God's richest blessing and benedictions upon you and all of '69 who may meet with you.

HERBERT S. HILL.

CHICAGO, April 19, 1909.

You and I were the youngest members of the Class of '69, and I shall be glad to see you again, if but for the one purpose of congratulation that you and I are in the minority.

J. C. HOFFMAN.

FAYETTE, IOWA, May 11, 1909.

I shall be glad to attend the reunion you are planning for this year. Physically, I am all right, mentally fair, professionally as busy as twenty years ago.

J. W. MCLEAN.

ROCKBRIDGE, ILL., April 21, 1909.

You can expect me to be with you. I am still in the harness, have enough to keep me in luxury if I could only persuade myself to think so. I am 65 and well preserved for a man of my age.

A. E. MILLER.

SCRANTON, PA., May 1, 1909.

I hardly think it will be convenient for me to attend the reunion of the Class of '69. Kindly give my love to all the old boys. In 1871 I returned to resume some connection with the college and passed through the ordeal of the great Chicago fire, October 7, 8 and 9. I saw the cupola burn and courthouse fall, and then with the assistance of another student and a wagon which we seized, saved a good part of Professor Rea's library and surgical instruments, taking them to his home, and returning crossed the river in a partly submerged skiff to find the college and my boarding house burned. The forming of an ambulance corps to help the fire sufferers, the reassembling of the class to continue college course in the Cook County Hospital, the dispensary work through the small-pox and cerebrospinal meningitis epidemics. I had the honor to be identified with and later was sent among the alumni in the prairie states to secure their aid in rebuilding the college. To me it was pathetic and inspiring to see the spirit and enthusiasm of the faculty starting into hard work to begin the battle of life over again in upholding and advancing the standard of our Alma Mater. And this indomitable energy was a high type of that which rebuilt and advanced the city of Chicago. I am still studying and practicing medicine. Tell the boys of '69 that I am well and happy and hope they are all the same.

JOHN EMMET O'BRIEN.

FORT DODGE, IOWA, April 21, 1909.

I could hardly believe that out of that 118 strong young men that took the degree of M.D. on that occasion, 46 remained on the mailing list of the Alumni Association: beside all the active members of the faculty of Rush at that time have one by one passed to the dim land of shadows, and live with us in memory only. I have practiced continuously in this state for thirty years now, have in the main good health, have done much hard work, am still in the harness and hope to be for years to come. I assure you there is nothing that could give me more pleasure than to meet those boyish faces of the long ago and whose hair has been whitened by the frosts of forty winters.

H. G. RISTINE.

ALBANY, WIS., April 19, 1909.

It will be a great pleasure for me to attend. I have an invalid wife, and it will depend upon how she is at the time. I am quite well and active. The day I was 68 years of age I rode 46 miles.

G. W. ROBERTS.

EMPORIUM, PA., April 17, 1909.

I will be there if possible, and I know of nothing at present to prevent.

S. S. SMITH.

THREE OAKS, MICH., May 1, 1909.

I shall certainly be there.

F. F. SOVEREIGN.

CHILLICOTHE, MO., April 20, 1909.

I should like very much to be with you in the body, as I shall in the spirit, but I have arranged to spend the summer on the coast and shall be deprived the pleasure of meeting you. I am in my 66th year, and in active practice in this town, where I located forty years ago.

B. N. STEVENS.

WASHBURN, ILL., April 19, 1909.

My age, 76, causes some uncertainty as to my ability to attend; however, I shall try to be with you.

JAMES TWEDDALE.

PEORIA, ILL., April 17, 1909.

It gives me pleasure to acknowledge receipt of your letter. Certainly I shall be present, health permitting.

O. B. WILL.

LONDONVILLE, OHIO, April 23, 1909.

No preventing providence, I will be present at the reunion of the Class of '69. That is right; give them the loud and long bugle call and bring back what remains of the battle-scarred heroes of forty years ago. Yes, I will "aim" to be there.

W. H. WIRT.

FINAL LETTER OF INSTRUCTION.

The reunion of the '69 class will be held at the Auditorium Hotel, June 1, 1909, at 5 p. m. Alumni Association meeting same place at 5:30 p. m. Joint Faculty Alumni banquet at 7 p. m. Gradua-

tion exercises of Rush Medical College, Mandel Hall, U. of C., 3 p. m., to which you are invited. Do not stay too late to reach our own meeting.

R. L. LEONARD.

Dr. Kleinpell of the executive committee thus speaks of us in the May BULLETIN: "Dr. R. L. Leonard, '69; Dr. E. A. Boas, '84; Dr. Edward H. Ochsner, '94, as well as the other members appointed, are making a special effort to have as many of their classmates here as possible on June 1, 1909. Dr. Leonard says that the Class of '69 will make a good showing, and surely the rest of us will have to take our hats off to the class of forty years ago." And they did.

The proposed reunion of the '69 class was held in the parlor of the Auditorium preceding the general meeting of the Alumni of Rush College. Forty-five members of this class are still on the mailing list; of these twenty sent acceptances and five sent regrets, owing to various causes. At the meeting, thirteen answered to roll call, and the class was organized by electing the oldest member present chief, this placing Dr. Harley G. Ristine of Fort Dodge, Iowa, in the chair. The youngest member was made secretary, and that office fell to Dr. Raymond L. Leonard of Chicago. It was decided to hold another meeting in two years. Unique badges were distributed, combining the U. of C. color in a maroon ribbon, and the R. M. C. color in an orange bow, the badge being lettered in gold.

R. M. C.

ALUMNI

1869

REUNION

CHICAGO, JUNE 1, 1909.

After the veterans had met and become acquainted with each other, letters were read from those who responded to the invitation to attend the reunion. That it was a joyous gathering may well be imagined, and a happier time than the veterans had is not witnessed in this vale of tears.

So much was crowded into a few hours that the old boys had only a taste of what they might have enjoyed had time permitted, and so they proposed and agreed to meet again in one or two years and provide some special feature of their own.

The class then marched in a body to the general meeting, their chief leading, where they were received with cheers. At the banquet their table was marked by a floral card set up with 1869 done in pink carnations and two large bouquets for the oldest member of the class, the chief, and the class guest, Prof. E. F. Ingals, who was invited as the family representative of the faculty of their student days, all of whom have passed away.

When the committee on nominations reported at the banquet, Dr. Raymond L. Leonard, '69, was named for President of the

Alumni Association and unanimously elected. He later announced that the Class of '69 had been invited to meet again in 1910 and serve as a special committee to receive the guests.

Dr. Raymond L. Leonard, being called upon at the banquet, spoke as follows:

*"Mr. Toastmaster and Gentlemen of the Alumni Association:—*We of the Class of '69 do not claim to have been associated with the famous surgeon, Daniel Brainard, in the day when he came around the head of Lake Michigan in 1835 mounted on an Indian pony, two years previous to the founding of Rush Medical College in Chicago, but some of us were in the class and heard his last lecture in 1866, our junior year.

"Some of us were again within its classic walls and received our diplomas with the fire class of '72, having attained the age of 21 years, the examination being held in 1869.

"Out of 118 who graduated in 1869, we rejoice that so many of us have been spared and are able to participate with you in this happy hour. Rush is all the world to us, ever in the front rank in medical education. We learn that the faculty stood for higher and better work at personal sacrifice and financial loss. Of course, they would do that; it is the blood that is in their veins, and it has made your boys proud of you every day. We have been on the firing line for forty years past, and now kneel at your feet, R. M. C., to receive your benediction and refresh ourselves by this reunion, and this inspiring contact with that which we hold most dear, that which we reverence—our Alma Mater, R. M. C., which has always represented the first and best in medical education and scientific progress in our chosen profession."

CORRESPONDENCE.

The following classical contribution is self-explanatory. It is published for the benefit of those who are in arrears with their dues. They might also experience the ecstatic thrill which inspired our worthy Alumnus to write this letter:

*To the Editor:—*Appreciating that to pay the Association dues after being dunned only eleven times, as I do, is not merely an act worthy of the highest praise and admiration, but one which attains to moral grandeur, I nevertheless cannot agree with the suggestion to announce this payment from the walls to the world in the form of a framed display receipt, as I understand has been proposed, for the loftier a deed the less should its performer call attention to it, even if it be the sublime sacrifice of giving a whole dollar to the Alumni Association. Let others, as they surely will, celebrate this noble gift for him in song and story, the donor himself preserve a majestic silence and at the most smile benevolently when his generosity is alluded to. I am therefore in favor of preserving the old style of receipt plus the few changes I have taken the liberty to suggest in the enclosed form.

Yours truly,

OTTO FREER.

ENCLOSURE

CHICAGO, Day of Joy, 1909.

Dear Doctor:—I am astonished and delighted to receive your dues to the Alumni Association of Rush Medical College for the current year.

Yours truly, _____, Secretary.

P. S.—It is hard to realize that I have that dollar. It must be only a lovely dream.

EDITORIAL NOTES.

The thanks of all members of the Alumni Association are due the retiring secretary, Dr. M. B. Linnell, who has so long and ably edited THE BULLETIN, and who is responsible for its development from a mere record of the minutes of the meetings to the very valuable organ of the Association which it now is. Dr. David Fiske is also entitled to a vote of thanks for all the time he has spent and all the care he has taken in looking after the finances of the organization. Our necrologist, Dr. O. S. Ormsby, who fortunately continues in office, has spent many an hour in collecting facts relating to deceased Alumni, and has thereby contributed much interesting material to THE BULLETIN.

With this issue THE BULLETIN assumes somewhat more dignified proportions, made possible by the fact that it is to be published quarterly instead of monthly, as heretofore. The growth of the Alumni Association and the fact that other colleges have more elaborate publications along this line, seems to indicate the necessity for our expansion, as it were. It has always been the motto of Old Rush not to let anyone get ahead of it, and so with the help of the whole Alumni Association the present editor will do his best to maintain the standard by getting together such material as will make THE BULLETIN a publication worth subscribing for. The hearty support of the Alumni should certainly be given. With new officers and new committeemen, the interest in the Association and in our Alma Mater will doubtless be renewed and stimulated. THE BULLETIN should be a signal success, and the membership of the Association should be increased to figures to be proud of.

To make THE BULLETIN more attractive a cover has been placed upon it. As to the material contained within this cover, that will depend a great deal upon the contributions of the Alumni members. It is the intention to have in each issue some original article by an Alumnus of Rush. In the present issue the two articles (abstracts) by Dr. Broughton, will not only be very interesting reading, but will give some idea of what our Alumni Fellow is doing along the line of original research. It is gratifying to know that the dollar contributions to the Alumni Fellowship Fund are being put to such good purpose. Who knows but that as a

result of our support our Fellow may make some scientific discovery which will reflect credit upon the Association for all time to come.

Items of interest concerning all Alumni of Rush will be gladly received and find a place under the heading of Alumni Notes. If possible, the class year should be specified in each case.

The Chicago members of the Class of '06 are extremely anxious to have a class reunion next year—a tenth anniversary. It is hoped that the members of the class who read this note will begin to think about attending this reunion and do what they can to get others to be present. Official notices will be sent out in due time.

An instructive and interesting reprint of an article by Dr. James Moores Ball, of St. Louis, entitled "Dr. Adam Hammer, Surgeon and Apostle of Higher Medical Education," has been received by THE BULLETIN. (Referred to Rush Library.)

Dr. Ira W. Porter of Omaha, Neb., sends an elaborate report of the Delegation from the National Fraternal Congress to the International Congress on Tuberculosis, 1908. (Referred to Rush Library.)

A Circular of Information regarding the course in Mechano-Therapeutics given at Rush Medical College has recently been sent out by the college to doctors and graduate nurses. In view of the possibility of its being of interest to members of the Alumni Association who might themselves desire to take such a course, or who might desire their nurses to become skilled in this branch, the circular is published herewith in full:

A COURSE IN MECHANO-THERAPEUTICS FOR GRADUATE NURSES.

Dear Madam:—For some years at Rush Medical College, Chicago, a course has been offered to its students and to the students in the Presbyterian School for Nurses, affording both theoretical and practical instruction in Kinesitherapy, Massage, Swedish Movements, etc.

The increasing desire on the part of physicians to prescribe such therapeutic measures for their patients has created a demand for the services of masseurs which cannot be met in many of the smaller cities and towns excepting by the graduate nurse, who has had suitable training for such service. Adequate training along this line is rarely offered in the regular course of instruction in the schools for nurses.

In order to give graduate nurses an opportunity to secure such instruction, Rush Medical College will admit to the course in mechano-therapeutics, during the autumn quarter, 1909, a limited number of graduate nurses, who possess the requisite preparation.

The course is described as follows:

Kinesitherapy.—A practical course in Kinesitherapy, consisting of lectures, demonstrations and practice by the student of Massage, Swedish Movements, the Frenkel Re-educative Exercises, etc.

Given in suite 105, Central Free Dispensary.

Monday, Wednesday and Friday, 8 to 11:00, autumn quarter, 1909, October 1 to December 23, 1909.

Assistant Professor Hugo Ad. Oldenborg.

Fee, \$40.00.

Applications for admission to the course or requests for further information should be addressed to Rush Medical College, Chicago.

The *American Journal of Surgery* will produce in December a Philadelphia issue of their journal, the subject matter of which will be composed entirely of contributions from among the leading men of the city. Among the subjects and contributors are the following:

"A Consideration of the Diagnosis and Treatment of Retrodisplacement of the Uterus," by E. E. Montgomery, M.D., Professor of Gynecology, Jefferson Medical College.

"Polypoid Growth of the Rectum and Report of a Recent Case," by Lewis Adler, Jr., M.D., Professor of Diseases of the Rectum, Philadelphia Polyclinic.

"Tumors of the Urethra in Women," by Barton Cooke Hirst, M.D., Professor of Obstetrics, University of Pennsylvania.

"The Control of Hemorrhage During Pregnancy," by Edward P. Davis, M.D., Professor of Obstetrics, Jefferson Medical College.

"Cyclodialysis," by Walter L. Pyle, A.M., M.D., Ophthalmologist to the Mt. Sinai Hospital, Assistant Surgeon of Wills Eye Hospital, etc.

"Roentgen Treatment of Malignant Diseases," by Charles Lester Leonard, A.M., M.D., ex-President of the American Roentgen-Ray Society.

"The Conservation of the Middle Turbinate Body," by William A. Hitschler, M.D.

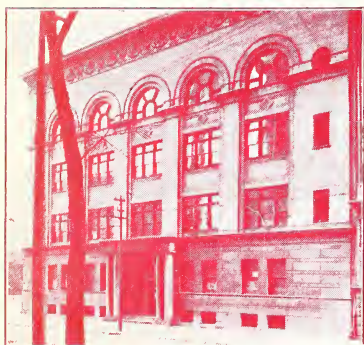
"The Diagnosis and Treatment of Ectopic Pregnancy," by F. Brooke Bland, M.D.

The following well-known surgeons will also contribute, and their titles will be announced at a later date:

Ernest La Place, A.B., A.M., M.D., Professor of Surgery, Medico-Chirurgical College; Prof. William Campbell Posey, Professor of Ophthalmology, Philadelphia Polyclinic; John G. Clark, M.D., Professor of Gynecology, University of Pennsylvania; H. M. Christian, M.D., Clinical Professor of Genito-urinary Diseases, Medico-Chirurgical College; John A. McGlinn, A.M., M.D., and others.



RUSH MEDICAL COLLEGE AND SENN HALL



LABORATORY



PRESBYTERIAN HOSPITAL

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OF

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TABLE OF CONTENTS

ORIGINAL ARTICLES.

	Page.
Recent Advances in Obstetrics. Carey Culbertson, M.D., Chicago.....	3
The Medical Clinics of Germany. James Henry Honan, M.D.....	13
Effects of Injections of Homologous Streptococci, Killed by Heat, in Streptococcus Complications in Contagious Diseases. George H. Weaver and Ruth Tunnicliff, Chicago.....	20
A Study of Streptococcus Immunization. George H. Weaver and Ruth Tunnicliff, Chicago	21
The Injections of Heterologous Streptococci, Killed by Galactose, in Erysipelas and in Scarlet Fever. George H. Weaver and T. Harris Boughton, Chicago	22
Serum Disease. George H. Weaver, M.D., Chicago.....	23
The Opsonic Index in Acute Articular Rheumatism. Ruth Tunnicliff, Chicago	24
Phlorizin Glycocholia. R. T. Woodyatt, M.D., Chicago.....	25
Some Unusual Bacteria Associated with Urinary Infections. David J. Davis, M.D., Chicago.....	26
Actinomycosis of the Ovaries and Tubes. David J. Davis, M.D., Chicago.	26
Immune Bodies in Urinary Infection with Colon Bacilli and Treatment by Inoculation. David J. Davis, M.D., Chicago.....	27
Influenzal Meningitis. David J. Davis, M.D., Chicago.....	27

MISCELLANEOUS.

Clinics, Hospitals and Societies.....	28
College Notes	31
Alumni Notes	32
Correspondence	33
Editorial Notes	34

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RECENT ADVANCES IN OBSTETRICS.

CAREY CULBERTSON, M.D.

Instructor in Obstetrics and Gynecology, Rush Medical College.

CHICAGO.

In recent years advances in the obstetric art have been made chiefly in the direction of technical improvement, though the most effort has been displayed, perhaps, in an endeavor to solve the various complex problems relating to the toxemia of pregnancy.

Taking up first, then, the real progressive changes, we find a strong tendency toward perfecting operative procedures, a disinclination to use certain operations that have failed to reduce either maternal or fetal mortality, and the development of older procedures or the invention of new ones to take the place of those discarded.

THE MANAGEMENT OF PREGNANCY, LABOR, AND THE PUERPERIUM.

This technical development is observed even in the management of pregnancy, labor, and the puerperium. Pregnancy, while always a natural physiological process, has come to be regarded as one that is rarely normal in every respect, even where the patient is not rendered absolutely pathologic. That the physiological and anatomical changes consequent upon gestation bring the woman nearer to the border line of pathology is realized, and taught as never before. The importance of the various pathologic conditions affecting the mother, as complications of pregnancy, are emphasized, likewise, more than formerly. Thus, phthisis is virtually taken as an indication for termination, the method differing according to the duration of gestation, the condition of the patient, and the various other factors in the case. In heart disease there is a tendency to revert to the dicta of Peter, laid down in 1883, as regards marriage and child-bearing. In the actual management of a case so complicated, pregnancy is only terminated where compensation has failed, and in labor the patient is saved from physical strain by some method of artificial delivery. The question of the so-called "kidney of pregnancy" has not been settled to the satisfaction of all. However, a genuine acute nephritis, not responding readily to treatment, is regarded as a good indication for ending gestation. In the chronic cases and in other kidney involvements, as pyelonephritis, treatment varies according to the symptoms and course.

Normal labor is regarded as so closely allied to surgery as to require all the technical environment of the surgical operation. This is, of course, by way of preventing septic infection and hemor-

rhage. These two complications remain, as ever, the black beasts of the obstetrician. While in our hospital wards and in our outpatient service they are rarely or never seen, it is evident that they occur frequently in general practice. In so far then as sepsis and hemorrhage are concerned, it is fair to say that there has been less advance in recent years in general obstetrical practice than in any other phase of the work. Krönig, of Freiburg, has recently come out advocating a simplification of technic in the management of labor, claiming that over-elaboration of equipment and preparation is a fault and one of the causes of infection.

In the puerperium, too, there is seen a corresponding technical improvement. The student is now taught to regard this period not only as one of convalescence following labor, but as one of prophylaxis from various gynecological disturbances subsequent to the changes and trauma of pregnancy and parturition. Thus the case must be followed up and the patient watched for a period of at least six or eight weeks. Lacerations not only are to be repaired, but displacements discovered and corrected. Measures leading toward a proper involution of the affected structures are to be taken, the patient being advised particularly regarding exercise, the avoidance of heavy work and straining efforts, and the proper method of dress during the first two or three months following parturition. This has reference chiefly to the involution of the structures composing the abdominal wall, permanent relaxation of which is bound to lead to that more or less definite symptom-complex known as enteroptosis.

INDUCTION OF LABOR AT TERM.

Adam Wright, of Toronto, advocates the induction of labor within three days after the patient has reached term as a matter of routine in all cases. This idea of bringing on normal labor when one is certain that gestation is complete is coming very logically into vogue. The dangers of prolonged pregnancy, not only to the child but to the mother as well, are only too often in evidence, while the method of induction is most simple. Wright follows the Schauta method, employing the vaginal tamponade, removing and reintroducing it in twenty-four hours if labor does not ensue. If this is not successful a bougie is passed before a third tamponade is tried. In Webster's service, at Rush, the rubber bag is used instead of the tampon or bougie, with generally favorable results, labor occasionally not following.

NARCOSIS IN OBSTETRICS.

The past six or eight years has witnessed the attempt to use a systematic narcosis in general obstetrics. The object sought is the production of a state of semi-narcosis, known as "Dämmer Schlaf," or twilight sleep, the patient being readily awakened without retaining consciousness of what has occurred in the meantime. The advantages

claimed are that the mother is thus given relief from the pains of labor and spared the "psychic traumata of childbirth." Scopolamin or hyoscin in combination with morphin are the drugs used. It is important that these alkaloids be absolutely pure and that the dosage be exact. The first dose is given after the pains become really severe and, according to Butler, the capacity on the part of the patient to remember regulates the dose, rather than her apparent suffering. This method has been used freely in some clinics in Germany, from which enthusiastic reports have issued, while in others the drugs are condemned. It is apparent that in selected cases the use of the scopolamin-morphin combination, when carefully employed, may be of value, but as yet it has not been demonstrated that these drugs are always safe. Indeed, the converse is true, many reports being most unfavorable. Gauss found 18.1 per cent. of the babes affected in 1,000 labors, and yet this writer claimed "ideal" results. Steffen states that the objections to the method are (1) that the dosage is insufficient for the desired effect. (2) that it is not free from danger to the mother and child, (3) that it is not to be recommended for private practice, because, owing to its erratic action, the accoucheur must be in constant attendance. Yet in the face of this one writer says that in America "this method is being employed by the rank and file of the profession with an enthusiasm which partakes of recklessness."

PUERPERAL SEPSIS.

In a recent elaborate article Stowe calls attention to the two principal forms of sepsis, (1) wound intoxication and (2) wound infection. The first form is due to an invasion of saprophytes, the symptoms are relatively mild and the prognosis is good. Wound infection, while due to the invasion of any infective agent, is usually caused by the streptococcus, the symptoms are invariably threatening, and the prognosis is always grave. Infection now spreads through the venous side of the circulation, causing thrombophlebitis, pyemia or septicemia, or by the lymph channels, giving metritis, parametritis or peritonitis.

Very little that is new has been added to this subject. The etiology and symptomatology is well understood, the prophylaxis is known, the treatment is too often in vain. Where the uterine cavity is involved, as it nearly always is, it is first cleaned out with the finger or curette-forceps, douched with a mild antiseptic or a normal saline solution, then packed with gauze wrung out in an antiseptic solution. Webster uses a formalin-glycerin mixture, thirty minims of formalin with four ounces of glycerin in one pint of water, or, more recently, a mild silver nitrate solution. This method has been employed with very favorable results for some years. In general the patient is given ergot, whisky as a food and stimulant, with hydrotherapy for the fever. No antipyretics are used. The diet is

a liquid one. Rectal retention enemata, or the continuous drop method, of normal saline is employed as indicated. The ice coil or hot fomentations are used externally on the abdomen. Where the infection proves to be of a streptococcic nature, further intrauterine treatment is unwise.

Serum therapy in puerperal sepsis is attractive but as yet most unsatisfactory. Antistreptococcic serum is of doubtful value, though in some cases it has seemed to do good. Jacoby, agreeing with Bumm, formulates his conclusions as follows:

1. In general septic peritonitis, large quantities of serum have no effect on the temperature or the number of streptococci in the blood.
2. In cases of peritonitis following a severe attack, where operation causes a mixed infection, the sera have no value.
3. There is one recovery in three cases in pure septicemia.
4. No benefit is found in septic endocarditis. Eventually the patient becomes worse.
5. No result in pure pyemia. Intravenous injection appears to influence the course unfavorably.
6. Cases of para- and perimetritis should be excluded because the cases tend to spontaneous recovery.
7. In endometritis streptococca Bumm believes the serum useful in localized infections. In severe cases it appears to be useless.

The silver salts have proved likewise unsatisfactory. Collargol is said to be best indicated in pyemia, septic pneumonia, and endocarditis. Its favorable action is the exception and its use may be followed by unfavorable symptoms, such as chills, rise in temperature, etc. In acute sepsis and peritonitis it is of no avail.

Similarly, the attempt to produce a leucocytosis artificially by the use of nuclein preparations has proved disappointing. As a matter of fact, thus far we are unable to increase the patient's resistance in the presence of a virulent infection.

In the face of such discouragement it is not to be wondered that some effort has been made to deal with this condition surgically. The ideal method would be to remove the source of the infection, the uterus. Unfortunately, to be of avail, this procedure would have to be done early before the infection had become extra-uterine, and therefore before the degree of severity would warrant such a radical operation. In pyemia, for instance, with a thrombo-phlebitis, hysterectomy would not cure and the operation might lead to a more virulent extension of the infection. In chronic pyemia, however, as recommended by Bumm, exsection may be attempted. The mortality of puerperal pyemia is very high at best, and early operation as soon as the veins are palpable might be of avail. The difficulty here, again, is in determining the time for operation.

PUBIOTOMY.

Extra-median symphyseotomy, pubiotomy, hebotomy, or hebostomy, as it is variously called by different operators, marks one of the most recent advances in operative obstetrics. As an improvement upon the old operation of symphyseotomy, this procedure is destined to stand as the best method of enlarging a contracted pelvis. Whether such enlargement is preferable to delivery by other means is, of course, another question. Most of these operations are still performed in the European clinics, where the subcutaneous method of Döderlein has gained in favor over the open method as originally devised by Gigli. The tendency in America is to regard pubiotomy as an effort to get away from the ever undesirable high forceps extraction and yet avoid abdominal section. The dangers of the operation are sepsis and hemorrhage, though some men consider it the operation of choice where, because of sepsis, Cesarean section may be contraindicated. Contraindication to the operation is claimed in pelves with a c.v. of less than 7.5 cm., according to C. B. Reed, though a minimum limit of 6.5 cm. has been established; likewise, though it has been performed in larger pelves, it is not considered requisite where the c.v. is more than 9.5 cm. This limitation places pubiotomy at once in the same field with induction of premature labor, prophylactic version, forceps, and relatively indicated Cesarean section. As to advantages, it may be said that for every 3 cm. of separation the pelvic diameters are enlarged 1 cm. Delivery may be effected by version and extraction or by forceps, or spontaneous expulsion may be awaited. In the process of repair some slight permanent enlargement of the pelvis is usually obtained. The period of convalescence in otherwise uncomplicated cases is speedy. The operation is better for the mother than high forceps and safer for the full-term child than premature labor or version, equally safe as forceps, though more dangerous than abdominal section. Fry expresses the American opinion in considering pubiotomy as a satisfactory operation for enlarging the relatively contracted pelvis in those cases where the child is living and Cesarean section is contraindicated. Reed has advocated the operation as one to be taken up by the general practitioner, but, while it may be a simple procedure and is usually described as such, like every other obstetrical operation, it may be a very difficult one and full of technical complications. Webster, who has done much to broaden the indications for abdominal delivery, does not advocate the operation.

CESAREAN SECTION.

Abdominal Cesarean section has profited by the general advances made in abdominal surgery and hence is a much safer operation to-day than formerly. For this reason its field has been enlarged by the more progressive obstetrics until it is now being done for a

variety of typical indications and in many unusual conditions. The important feature is that the operation should be decided upon as early as possible before the patient becomes exhausted by the stress of ineffectual labor pains or rendered anemic by loss of blood. Thus performed, abdominal section is better for the woman than either high forceps or version, and certainly safer than any other operative extraction for the child. Whether the conservative method of Säger or the hysterectomy of Porro be chosen depends of course upon the conditions which obtain. Reynolds believes that in delicate women where there is marked mechanical obstruction, in those poorly equipped for labor, such as show a high percentage of morbidity after intra-pelvic operations and a low degree of resistance after even normal labors, Cesarean section should be primarily undertaken. Again, in placenta prævia, where a too great loss of blood has not occurred and where the cervix is closed or but slightly dilated, Webster has been resorting to abdominal delivery. In this his attitude is upheld by Sellheim, Krönig, Labusquiere, Condon and others. DeLee advocates the same treatment, but confines his indication to placenta prævia centralis, with a closed os, at or near term.

In 1906, Frank, of Cologne, reported a modification of the classical Cesarean section which he had devised for those cases where abdominal or pelvic incision was the alternative to craniotomy on the living child. This operation consisted in a transverse abdominal incision just above the symphysis down to the peritoneum. This is then opened, the utero-vesical fold is dissected upward and sutured to the lower margin of the parietal peritoneum, thus shutting off the peritoneal cavity. Then the uterus is opened by a transverse incision through its lower segment and delivered of its contents. Repair is then made with interrupted catgut and silk sutures. This operation was readily taken up by other German clinicians, several of whom have offered various modifications, until to-day it is performed with either the longitudinal or transverse incision, either transperitoneally or extra-peritoneally. Sellheim is one of the strongest advocates of this extra-peritoneal section and has performed it eight times for placenta prævia without loss of mother or child. The operation is particularly indicated in those cases where the usual type of Cesarean section is ruled out by reason of probable previous infection. From a historical point of view it has been recently pointed out that this operation was proposed by Jörg as long ago as 1806 and by Ritgen in 1841. In 1823 Baudeloque called the procedure gastroelytrotomy. Thomas recommended it in 1870 and Skene performed it several times.

Vaginal hysterotomy, the so-called vaginal Cesarean section, while not so recently devised, is another important advance of late years. It is now well established as an obstetrical operation and is of great value in its rather limited field. Without doubt it is the most

easily, quickly and safely performed method of rapid delivery where the cervix is closed. Here also the indications have broadened. Sprigg has stated them very generally under two heads: (1) when the life of the mother or child is in grave danger and the uterus must be quickly emptied, the cervix being rigid and unyielding; (2) where manual or instrumental delivery is sure to be attended with lacerations, as in carcinoma cervicis, stenosis of the cervix, etc. Hence the procedure is best undertaken in eclampsia, carcinoma, premature detachment of the placenta, and in cervical rigidity, due to cicatrix formation. It has the advantage as well of being relatively painless and therefore of selective value in those complications which render general anesthesia unsafe, as in heart disease, nephritis and pulmonary edema. Technically the operation stands unchanged.

TOXEMIA OF PREGNANCY.

While great advance has not been made in recent years in solving the perplexing questions relative to toxemia, yet the obstetricians' greatest efforts have been directed toward such solution. According to the latest investigations, under the term toxemia of pregnancy are included all forms of disturbances due to the retention of products of incomplete metabolism in the body. Bouchard has gone so far even as to claim that every pregnant woman reveals, in some degree, evidence of auto-intoxication or toxemia. The liver and kidneys are the organs most often deficient in this respect. The findings, pathologically, are characteristic of no particular disease, ranging from a diffuse fatty degeneration in mild cases to acute yellow atrophy in fatal cases, or to typical miliary necrotic areas as in some cases of eclampsia. Schmorl considers this necrosis pathognomonic of eclampsia. In the kidney a similar fatty degeneration is found, with necrosis only of the epithelium. One writer has attempted to divide these toxemias into two classes, the hepatic type, where the liver is the chief organ involved, and the nephritic type, where the kidney is at fault. Williams made an effort a few years ago to find some explanation for toxemia in the excretion of nitrogen as ammonia in grave disturbances. The result of his observations was that as the percentage of the ammonia coefficient rose above ten the degree of the toxemia was increased. Working along the same line but more fundamentally, Folin shows that ammonia is chiefly produced in the alimentary canal, rapidly increasing with proteid digestion, and that the liver is really the only organ that can convert it into urea; secondly, that an excess of ammonia in the urine is merely an evidence of an acidosis and not a sign of fault on the part of the liver. Since, as is well established, the total amount of nitrogen is entirely dependent upon the diet, it is only fair so far to say that a high ammonia coefficient is more aptly coincident with toxemia than due to it.

Hence, in pernicious vomiting and in eclampsia we are still without a scientific explanation, and therefore treatment is based upon clinical findings alone. In hyperemesis this consists in a strict dietary, beginning with a complete rest for forty-eight hours for the stomach and then cautiously and gradually increasing the amount of food. Accompanying this, measures must be taken toward elimination. As Jackson has stated it in general terms in a recent article, the treatment consists in (1) stopping the input of the poisons, (2) the removal of their source, (3) their removal from the body, (4) the minimizing of their effects.

ECLAMPSIA.

Eclampsia is now regarded as one expression of the toxemia of pregnancy. Investigations of the past few years have brought forth no new knowledge, but they have furnished the basis for a series of theories as regards the etiology. Veit believes that the fetus is the source of the poisons, Liepmann that these are produced by the placenta acting as a filter between mother and child. Zweifel was the first to call attention to the altered ammonia coefficient in the urinary nitrogen. He, with Lockemann and Füh, has found lactic acid in the blood, urine and cerebrospinal fluid. Hofbauer regards autolytic changes in the cells of the body, especially in the liver, as an important factor in eclampsia. Dienst thinks that there is a passage of fetal blood into the maternal circulation. This, acting like blood from another species, produces in the maternal blood various antibodies which are toxic, causing coagulation in the maternal capillaries. This meets with Schmorl's theory that such coagulation always precedes cell degeneration as the primary process. To-day the "placental theory" holds first place, taking, however, three somewhat different forms:

(1) Veit's theory, that the presence of placental cells in the maternal blood led to the formation of specific anti-bodies, called syncytiolysins, and that eclampsia occurs when the placental elements are too numerous or powerful to be dealt with by the antibodies.

(2) Ascoli's theory, that the excess of syncytiolysins alone produces the auto-intoxication.

(3) Weichardt's theory, that the intoxication is due to syncytio-toxins which have been liberated from placental cells by the syncytiolysins and which are too numerous to be dealt with by the antitoxins.

At present these theories are being modified and various new ones along the same line of thought are being presented.

So far as treatment of eclampsia goes, nothing new has come. This consists, in a word, in vigorous elimination (1) by the gastrointestinal tract, (2) by the kidneys, (3) by the skin, (4) by the

blood, and (5) by the parturient tract, i. e., rapid delivery as soon as possible. Edebohl's operation of decapsulation of the kidney is still performed by some operators in selected cases, the difficulty being to determine the proper time for operation and the fact that the operation is one for which the general practitioner is not prepared.

THE MEDICAL CLINICS OF GERMANY.*

JAMES HENRY HONAN, M.D.

Germany to-day is considered by many to be the greatest medical country of the world. There are several reasons why this should be as it is. In the first place, it is the greatest military country of the world, which is largely accountable for its advanced position in medicine. The whole life of the country revolves around a military center or ruler. Every hygienic or prophylactic measure has a monetary value to the government, freighted as it is and always has been with a very large standing army. Fourteen years ago when I first visited Berlin, there were more soldiers quartered in that city alone than we in America had in our whole standing army. Their system of calling professors to the different chairs tends to improve the standard; in fact, the whole educational system is one of sifting and selecting, so that only men of the best attainments reach the highest positions. When a man becomes a teacher in Germany, he expects to be a teacher the remainder of his life. He is first an assistant in a clinic or laboratory and assiduously applies himself to the various steps in the ascent.

After he has shown an aptitude for scientific work and has written works which attract the attention of his seniors he may receive the title of Privat Docent. Many never get beyond this stage, while others climb more rapidly. The man who aspires to the position and title of Privat Docent must make a formal application to the medical faculty of the University. A committee of two is then appointed to examine his credentials and writings, and if found satisfactory the faculty then calls an evening meeting, usually at the dean's house, when the young man is requested to read a paper.

If he meets with the approval of the faculty, he is invited to read a paper before the public in the Aula of the University, at which time the dean of the faculty clothed in his robes of office formally confers the title.

The title of Privat Docent, as the word indicates, carries with it the privilege of teaching, and usually those seeking this right intend making teaching their life's work.

* Address delivered at Rush Medical College, Jan. 4, 1910.

From Privat Docent to that of Ausserordentlicher Professor or Professor Extraordinarius is more than a step; it is more often a long and difficult way. The details of conferring the title are in general like those already described.

Ordentlicher professor is the highest title granted by the University, and is conferred only on such as have received an appointment to some chair in the institution.

These three titles are the only ones granted by the University. They are formally conferred by the dean of the faculty, for merit alone and usually after years of earnest work on the part of the teacher.

The titles of Sanitätsrat, Professor Geheimrat and Wirklicher Geheimrat Excellenz are conferred by the government through the Minister of Education. In looking over the teaching staff of the different German universities, one is impressed by the number of prominent men who have remained Docents, so far as any recognition from the University is concerned, many of whom, however, have the title of Geheimrat from the government. Some well-known teachers, who are doing excellent work, are in the Privat Docent class. Again, many who bear the title of Professor Sanitätsrat and Geheimrat are not teachers and are not connected with a university, but whose work has been of such high character in some special way as to merit this recognition. On the other hand, many teachers prominent in their profession have not the title of Professor. This title is formally conferred and no other has a right to assume it. There are said to be some cases where the title has been conferred through influence rather than merit, but they are very exceptional. It is unfortunate that in our own country so many highly qualified men are dropping this title, because they do not wish to be confused with a lot of uneducated men and quacks to whose name the title "Professor" has become a prefix. Geheimrat, which means Privy Councilor, has lost its original significance in that it is now simply a title of honor conferred in middle or advanced life after years of teaching or meritorious work, carrying with it no official duties. The highest title that can be reached by medical men is Wirklicher Geheimrat Excellenz; this is acquired by very few. Koch, v. Bergmann, v. Leyden, v. Esmarch, v. Czerny, are a few of the medical men whom I know to have received this title. We Americans in our intercourse with foreigners, are too apt to ignore the significance of these titles which have been formally conferred and which mean so much to those who have won them.

There is another admirable feature of the German system, that is, their custom of honoring the memory of their scientific men. Throughout the land one may see the statues of medical men alongside of great heroes and military leaders, adorning public places. This tribute, let me add, is not reserved for those who have departed this life, but is bestowed on the living as well.

For example, in the relief of the Virchow monument which is to adorn the Karl's Platz, near the Charité in Berlin, the scene of most of the activities of this great teacher, are also figures of Waldeyer, Orth, Fraenkel and others who are still active in their respective lines of work. This custom no doubt is a great stimulus to others to do things that may be recognized. In considering this phase of my subject I must point out that which many have no doubt observed, the trait of constancy in the German character. The Germans are patient and long suffering. If they do not accomplish their object this year, they continue until they do reach their objective goal. To give you an example: A friend of mine in Berlin, whom I am sure many of you would know if I were to mention his name, was a Docent when I first went to Berlin. Although he has in the last thirteen or fourteen years done a prodigious amount of splendid work, it is only this past year that he has received the title of Professor. I believe there is no country in the world where young men show such willingness to continue in subordinate positions, for so many years doing earnest meritorious work, in the hope that they may eventually reach another round of the ladder. This constant plodding is an innate quality of the German character and is stimulated by certain conditions. The young man of good family has but two ways open to him for a career. He may choose a military life or a professional life, a business career being one that is almost never thought of. Another factor that tends to improve the work of the individual is the almost absolute freedom and independence which every Professor in a German university has in his teaching and individual work. He is an absolute autocrat in the chair which he occupies and enjoys a freedom which is not surpassed in any other country of the world.

The clinical material with which the German professor works is abundant and submissive, two essentials for the best results, and may be handled as pathological material, ignoring entirely the individuality; and although there are a number of clinics in all the cities, the density of population keeps them all well supplied.

There are two kinds of clinics: those connected with a public institution, as the hospitals or laboratories supported by the government, or the city, and the private clinics. Any man who has acquired all the qualifications of practice may secure a police license to start a private clinic.

With due respect to the larger institutions it is my experience and the experience of many of my confrères to find some of the best work being done in these private clinics, and it is often a great surprise to American physicians in looking up a man in whose scientific work they have been interested and have followed for a long time, to find him doing his work in very cramped quarters and with very meager equipment. Most of the larger hospitals have a policlinic in connection, where the cases suited for ward treatment may be sent to

the wards and the ambulatory cases treated in the polyclinic. Cases especially suited and interesting for teaching may be selected. Almost all hospitals and polyclinics are arranged for teaching, and it is seldom one finds a clinic where teaching is not given in some form. It is only in the larger cities, such as Berlin, Hamburg, Leipsic, Dresden and Munich, that one finds the private clinics. In the smaller places the government or the city furnishes all the clinics and polyclinics. The clinical possibilities in small places is often a great surprise to American medical men. One often finds most excellent clinical work being done in these small places.

In Tübingen, a place of but 10,000 inhabitants, the clinical work is of exceptionally high character.

Ordentlicher Professor Romberg, who is at the head of the internal medical department, is a fine clinician, as you may infer from his excellent work on "Diseases of the Heart and Blood-Vessels," the second edition of which has just left the press.

I also found in this small place one of the world's most accurate and scientific workers in the field of hydrotherapy, Prof. Otfried Müller, the first to establish the law of antagonism between the peripheral and internal circulation in the human. This man, though comparatively young, has been twice called to other universities, declining both times, no doubt because Tübingen offers better opportunities for scientific work.

Having lived in Berlin almost the entire fourteen years I have been abroad, I am naturally more familiar with the clinics there than in other places in Germany. However, the hospital government and general rules are practically the same throughout the empire.

Few who have not visited Berlin within the last ten years can have any conception of what the city is to-day. From a slow, plodding, overgrown, provincial town it has suddenly become what the Germans call a *Weltstadt* or metropolis. The way in which the educational institutions, the charitable and municipal organizations have grasped and mastered the situation to meet the new conditions is simply astonishing.

The greater Berlin consists of Schoeneberg, Willmersdorf and Charlottenburg, which form a continuous city from center to periphery and number about 2,300,000 inhabitants.

The general scheme for supplying the teaching staff is one of selection. The smaller universities call as professors the best of the assistants from the larger universities, and in turn the position seeks the man.

When a vacancy occurs in any of the chairs of medicine or surgery, the faculty meet and select three men who in their judgment are best qualified to fill the position. The names of these men are given to the ruling sovereign through the Minister of Education. The names must meet the approval of the ruler, who signs the call,

making it really a royal command. Should the first one called decline, for any reason, the second is then named, and so on.

A professor called to a chair in Germany knows it is a life position, and he may accordingly direct most of his energies to research work, if he is so inclined, and as so many are inclined that way, we have a very rich German medical literature.

The Germans are the pathfinders in many branches of medicine and surgery, and the world is certainly indebted to their country for many of the great discoveries in medicine.

The hospitals of Germany have improved wonderfully in the past few years. In Berlin the Charlottenburg Hospital and the Rudolph Virchow Hospital have been built within the last ten years.

The Charité hospital, the oldest in Berlin and perhaps in Prussia, was founded by King Frederick the First about 200 years ago. Alarmed by the plague that was then raging in Europe, he built this hospital to meet the emergency he feared would arise. Berlin escaped the plague and the building was then converted into a poorhouse and lazaretto.

The first surgeon in charge established a clinic for teaching army surgeons in order that it would not be necessary for them to go to foreign parts for training. Leyden was then the great medical center of Europe, having at the time 12 beds available for teaching. This first teacher of surgery in the Charité was assisted by four barbers. The old Charité is fast giving place to a new Charité, each year a wing is torn down and a new wing is added. In this way the usefulness of the building is not impaired while construction is going on and in two or three years there will be a handsome new Charité, equipped with all the modern improvements. It will have, when completed, 1,247 beds with a little more than 113 sq. ms. per bed. The air space runs from 23-40 cubic meters per bed. The new Charité will have 13 departments with 11 directing physicians.

At the head of the first Imperial medical clinic is Geh. His, who succeeded v. Leyden. Prof. His is assisted by three military surgeons, six resident physicians, and nine under assistants. He is an excellent teacher, a fine clinician, and has an exceptionally broad and brilliant intellect. The His bundles are his bundles and not those of his illustrious father, the great German anatomist. Professor His is very popular with the students and his lecture room is crowded from the beginning to the end of the semester. He is held in high esteem by his contemporaries. All his lectures are clinical and often numbers of patients are brought in to demonstrate a special feature of the subject under consideration. In this clinic, as in most other clinics, lantern slides are used very often to demonstrate cases; indeed, the projection lamp is an important factor in teaching in most of the clinics throughout Germany.

The directing physician of the second medical clinic is Geh. Kraus, called from Gratz, Austria, to succeed the late Gerhart. In this clinic there is also a large number of assistants, military and civil. Professor Kraus has a strong personality, is a fluent lecturer, an indefatigable worker, a resourceful clinician and a very genial man.

The first electro-cardiograph in Germany was installed in his clinic and no doubt his forthcoming book will give us some valuable information in regard to cardio-vascular troubles. Einthoven, a physiologist of Leyden, Holland, the inventor of the electro-cardiograph, has some excellent tracings by this instrument, but it must necessarily remain for the clinician to give us the true and practical interpretation of these tracings.

The German clinicians are progressive and up to date, using the newest and best diagnostic methods and are particularly accurate and painstaking in their laboratory tests. The blood pressure instruments used are many and, unfortunately, vary as in other countries. Since 1896, when Riva-Rocci put his sphygmomanometer on the market, we have seen a new instrument appear every year, and whether one uses the Gärtner, Recklinghausen or the Sahli, depends, unfortunately, too often on whether the instrument is handy to operate rather than on the absolute accuracy of its readings. In my private practice I use the Uskaff sphygmotonograph, as also in clinical work in the Charité of Berlin this instrument is there used now almost exclusively. I find it the most accurate and satisfactory I have seen.

Geh. Orth, who is the successor of the late Virchow, is doing splendid work in the pathological institute connected with the Charité. He is proving a worthy successor of the great father of cellular pathology. Orth's work in cellular carcinoma is well known. He believes carcinoma is purely a cellular disease.

Connected with this laboratory is the Pathological Museum, the finest collection of pathological specimens perhaps in the world. In this collection Virchow took a great interest, and during his long active career practically made it what it is to-day.

In 1908 the Charité treated in the wards 15,110 patients, who averaged 26.9 days in the hospital. In that year there were 1,464 deaths. Autopsies were held on 1,352.

Among the other well-known men who are chiefs of clinics at the Charité are Fraenkel, Huebner, Bumm, Ziehen, Lesser and Hildebrand.

This royal institution fills a threefold purpose; it is first a hospital, it is a clinical and research teaching institution of the university of Berlin, it is a training school for military surgeons, where post-graduate courses are given for regimental surgeons by the chiefs of the different departments. These courses are given free to the military surgeons every spring and autumn.

In connection with the Charité is the "Pepeniére" or Kaiser Wilhelm Academy, founded by Frederick the Great as a school for Army Surgeons. A young man may enter this institution as soon as he leaves the Gymnasium and receive his entire medical education absolutely free, as also his board and clothes. He must at the same time enter the University, complying naturally with the University curriculum, and pledge himself to remain in military service eight years after graduation, which requires now, in the Berlin university, six years. Each professor appointed to a chair in the Charité is also appointed to the Kaiser Wilhelm Academy and receives from the latter a salary of about 1,000 marks per annum aside from the dues for the courses of the individual students from the Academy.

The Charlottenburg Hospital, finished in 1905, has a capacity of 1,000 beds. The equipment of this hospital is very complete and up to date.

Hydrotherapy and mechanical appliances have here received due attention and their department is equipped for giving all kinds of baths, including sun and sand baths, inhalation, passive movements, etc., and in this respect probably excels all other German hospitals.

Professor Grawitz, the directing physician, though a comparatively young man, is well known throughout the medical world for his work on blood.

He is a thorough and careful clinician and a very diligent student. At the Charlottenburg hospital there are no regular courses of lectures given to students, but excellent private courses are given by Professor Grawitz on the study of blood, and in pathology by Professor Dietrich.

It is a great privilege to study with Professor Grawitz, a man so universally recognized as an authority and one so eminently qualified as a teacher.

Physicians are always welcome at his hospital and are conducted through the wards. This is true of nearly all the hospitals in Germany—the foreign physician is given a cordial reception and afforded an opportunity of seeing the work that is being done.

This is also true of most of the laboratories. In the Ehrlich laboratory, for instance, to which hundreds of foreign physicians make pilgrimages every year, one is received most cordially by Geheimrat Ehrlich, and in whatever special department of his work you are interested an assistant from this department is delegated to conduct you through the entire place, explaining everything carefully.

One feels he has here reached the fountain head of analytical pharmacy; the prodigious amount of work accredited to this institution can only be understood by a visitor to it and seeing the organization of each department. All of the serums of Germany must

be first examined in this laboratory before being put on the market. Ehrlich's present work in chemical therapeutics has led to the finding of a substance which has a marvelous result on trypanosomiasis of animals, and the drug is now being tried on human sleeping sickness in Africa, in which we have reason to hope for excellent results.

Throughout Germany there is a marked improvement in the hospitals. In Frankfurt, in the new city hospital as a model, the large laboratories are equipped with all modern appliances, the wards well lighted and each building provided with a large sun balcony. In Stuttgart the older hospitals are being remodeled and very much improved. This is also true of Tübingen, Munich, Breslau, Dresden and many other cities.

The greatest improvement is noticed in the laboratories and their equipment and in the operating rooms. The operating room of Czerny, in his Cancer Hospital at Heidelberg, is the most modern and complete I have seen anywhere. Czerny has resigned the chair of surgery in the University, and is devoting his whole time to cancer work. His laboratory is divided into three departments—clinical, bacteriological and seriological, each having a separate working staff and director.

Another improvement which is quite apparent in many of the hospitals throughout Germany is the modern equipment for giving baths. Hydrotherapy is receiving well-deserved attention. Since the Imperial University of Berlin established a Hydrotherapeutic Institute in 1901 and began a scientific study of hydrotherapy, it has stimulated the interest in this important branch of medicine throughout the empire. In many places the artificial carbonic acid baths are given, the best in my judgment being the Keller system of Dresden. These baths are given according to the analyses of the waters of Bad-Nauheim, and most of them prepared from the salts received direct from Bad-Nauheim.

I am sorry not to be able to enter into the details of Geh. Bruger's splendid work in the Imperial Hydrotherapeutic Institute in Berlin.

The Rudolph Virchow Krankenhaus, the largest and newest hospital in Berlin, with a capacity of 2,000 beds, is built on the pavilion plan. Geh. Goldscheider, who has given us his new method of percussion, is the directing physician.

As one enters the portals under the administration building, he receives the impression of a model city rather than that of a hospital. A beautiful landscape garden stretches away to the farther end of the extensive grounds. The one-story pavilions, grouped in an ellipse around the garden, give a very pleasing architectural effect. Everything is beautifully arranged, with each ward complete in itself. There are 67 buildings, constituting what looks more like an ideal village than a hospital; the maintenance costs

about 20,000,000 marks a year, and the city must make up a deficit of about one-half this amount.

Munich is one of the attractive medical centers of Germany for foreigners as well as for Germans. There is always interesting work being done in Munich by Prof. Friedrich von Müller, who is the directing chief of the university clinic for internal medicine. Friedrich von Müller is considered one of Germany's best men, and though he has received some important calls to other universities, evidently prefers remaining in Munich. He has quite a large clinic of nearly 300 beds, and has several able assistants. Perhaps his most important contributions to medicine are his writings on metabolism.

Bollinger, who has described so graphically the "Munchner Beer Heart," holds a prominent place in pathological circles of Germany.

Kraepelin, thought by some to be the greatest authority in the world on mental diseases, is also doing a great deal toward making Munich an attractive medical center.

Post-graduate work for German physicians has been greatly facilitated by an institution called the Kaiserin Friedrich Haus, established in 1903 for the advancement of medical teaching. There is a central committee located in Berlin, which directs and assists as their constitution declares, "by advice and by acts," all movements tending to improve post-graduate work throughout the empire. The Reichsausschuss, as it is now called, assists in forming local committees in all parts of the country, and will even give pecuniary help when it is necessary. They have a large collection of models, apparatus, etc., which, when not in use in Berlin, may be sent to other cities or towns for the purpose of assisting in post-graduate courses. Professors from Berlin are at times sent out to hold single lectures where a course is being given, in which case the professor is paid only his traveling expenses. All of the courses are free and many of Germany's best men are giving their services to this very commendable work. These courses, naturally given at vacation time, between the semesters of the respective universities, cover usually the entire field of practical medicine and surgery. Connected with this central organization are now 52 local committees, in as many cities and towns. There are also academies, working through the central committee organized in different cities, particularly where there are no universities, as in Frankfurt, Cologne, Dusseldorf.

Connected also with this central organization are Docenten Verein, composed of teachers who give courses for physicians. These courses, however, are not free like the others, but the honorarium is very small compared to the work offered.

For example, the Docenten Verein of Munich announced an autumn course aggregating nearly 100 hours of teaching and covering every phase of psychiatry, with nine different teachers, includ-

ing Kraepelin of Munich, Liepmann and Brodman of Berlin, the fee for the entire course being 60 marks or \$15. In this way the influence of the central organization is extended to every province of the empire, and physicians in the smaller places can progress in medical science without sacrificing their time and practice. The country doctor, by application to the central bureau of information at the Kaiserin Friedrich Haus, may obtain details of all the courses given in the empire. The organization does for practicing physicians what the university does for undergraduates of medicine.

It might be of interest to know there is in Berlin an Anglo-American Medical Association which was organized by me nearly seven years ago for the purpose of assisting American and British physicians coming to Berlin for study in securing the work they want without loss of time. The orientieren or information committee is prepared at all times to give detailed information on any course given in Berlin; also the information on boarding places (pensions) and all other information a stranger in a foreign city would require. There is a meeting every Saturday night at the Restaurant Heidelberg in the Central Hotel building on the corner of Friedrich and Dorotheen streets. The meetings occur at 7:30 p. m., and the lecture by one of the university professors occurs at 8:30, after which there is a social hour to discuss the clinical work, etc.

The library and reading rooms are at Rothacker's book store. Friedrich street, 105 b. A bulletin of all the work is kept at the Café Kaiser Krone, corner of Friedrich and Karl streets, where doctors may meet any hour of the day and talk over the work.

Any one contemplating doing post-graduate work in Berlin should write for detailed information to the President of the Anglo-American Medical Association of Berlin, 78 Lützow Strasse, Berlin, West, Germany.

EFFECTS OF INJECTIONS OF HOMOLOGOUS STREPTOCOCCI, KILLED BY HEAT, IN STREPTOCOCCUS COMPLICATIONS IN CONTAGIOUS DISEASES.*

GEORGE H. WEAVER AND RUTH TUNNICLIFF.

CHICAGO.

(From the Memorial Institute for Infectious Diseases, Chicago.)

The authors injected homologous streptococci, killed by heat, in a series of patients who suffered from streptococcus complications in contagious diseases, especially in scarlatina. Their experience leads them to the conclusions that in acute processes the effect of the injection was imperceptible. Because of the great variability in the

* The Journal of Infectious Diseases, Dec. 18, 1909, No. 5, v, 585-588.

natural course of these complications uninfluenced by treatment, it is almost impossible to judge the effects of treatment in individual cases. The general impression obtained is that such injections are without beneficial effect.

A STUDY OF STREPTOCOCCUS IMMUNIZATION.*

GEORGE H. WEAVER AND RUTH TUNNICLIFF.
CHICAGO.

(From the Memorial Institute for Infectious Diseases, Chicago.)

A STUDY OF THE IMMUNIZING EFFECTS AGAINST HOMOLOGOUS ORGANISMS OF INJECTIONS IN RABBITS OF STREPTOCOCCI KILLED BY HEAT AND KILLED BY CHEMICALLY INDIFFERENT AGENTS.

The authors had previously employed injections of streptococci killed by heat in the treatment of streptococcus infections without satisfactory results. This study was undertaken to determine the effects in experimental animals of streptococci killed by suspension in a strong solution of galactose and to compare the results thus obtained with those observed when streptococci killed by heat were injected.

The article ends with the following conclusions:

Injections into rabbits of streptococci killed by suspension in 25 per cent. galactose solution gives rise to a greater or less degree of protection against the subsequent injection of homologous living virulent organisms.

Such injections are followed by a marked increase in streptococco-opsonin, and a persistently high index may be taken to indicate a condition of immunity.

Whether the amount of opsonin is a measure of the full degree of immunity cannot be stated.

Injections into rabbits of streptococci killed by heat do not protect them against the subsequent injection of homologous living virulent organisms, but may even lower their natural resistance.

Such injections are not followed by any considerable increase in streptococco-opsonin.

The results of the injection in rabbits of streptococci killed by heat may throw some light upon the questionable results obtained by the injection of heat-killed streptococci in man in cases of streptococcal infection.

In cases of subacute and chronic infection by streptococci in man, therapeutic injections of homologous streptococci killed by chemic-

* The Journal of Infectious Diseases, Dec. 18, 1909, No. 5, v, 589-607.

ally indifferent agents are recommended. The use of streptococci killed by heat in such cases is of at least doubtful benefit.

In the case of every pathogenic bacterium the immunizing effect of the bacteria killed in various ways should be studied in animals and injections of such materials were better employed in man only when substantial favorable results have been observed in animals.

Until killed heterologous streptococci are shown to be active against various strains of streptococci, injections of homologous streptococci are preferable.

It is desirable to study the injection in children of streptococci isolated from cases of scarlet fever and killed by chemically indifferent agents with respect to its protective effects against scarlet fever.

THE INJECTIONS OF HETEROLOGOUS STREPTOCOCCI, KILLED BY GALACTOSE, IN ERYSIPELAS AND IN SCARLET FEVER.*

GEORGE H. WEAVER AND T. HARRIS BOUGHTON.

CHICAGO.

(From the Memorial Institute for Infectious Diseases, Chicago.)

The work reported in this paper is a continuation of that contained in the above article by Weaver and Tunncliffe. The injections were employed in twenty-two cases of erysipelas and one hundred and sixteen cases of scarlatina.

The authors have arrived at the following conclusions:

1. The injection of polyvalent, heterologous streptococci killed by chemically indifferent agents during the acute stage of erysipelas has no appreciable effect upon the course of the disease. In cases running a prolonged course such injections appear to exert a favorable effect.

2. The injection of such streptococci during the early stages of scarlet fever does not prevent the later development of local streptococcus complications, although they may appear a little later in the disease.

3. The injection of such killed streptococci after local streptococcus complications have developed in scarlatina exerts considerable influence in hastening recovery. The later the complications appear, the better the results following the injections.

4. Homologous streptococci are probably preferable for preparing the material for injection both in protracted, subacute, chronic and recurring cases of erysipelas and in cases of scarlatina with local streptococcus infection.

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SERUM DISEASE.*

GEORGE H. WEAVER, M.D.
CHICAGO.

(From the Cook County Hospital and the Memorial Institute for Infectious Diseases, Chicago.)

This paper is based upon the study of 236 cases of serum reactions, observed in the Cook County Hospital from Nov. 1, 1906, to Dec. 25, 1908. These 236 reactions occurred among 956 cases of diphtheria.

The following conclusions are a brief résumé of the article:

1. The terms "serum disease" and "serum reaction" are preferable to other expressions which have been used in speaking of the symptoms provoked by injections of alien serums. The reaction is dependent on the proteins of the serum and bears no relation to the antitoxin or other antibodies contained in the serum. In general, the serum of one species of animal is toxic when injected into an animal of another species.

2. The occurrence of a serum reaction after the injection of antidiphtheria horse serum is determined in part by the susceptibility of the individual and the toxic properties of the particular serum administered, but in largest measure by the total quantity of serum employed. Precipitated serum calls forth reactions in about the same proportion of cases as does whole serum in corresponding bulk.

3. The interval between the injection and the appearance of the reaction varies from a few minutes to three weeks or more. The majority of reactions appear before the eleventh day. The length of incubation is independent of the number of injections and the quantity of serum.

4. When a primary injection, after an interval of ten days or more, is followed by a secondary one, the subsequent reaction is apt to be intensified and to occur after a shorter incubation period.

5. Serum reactions following secondary injections correspond to the phenomena of anaphylaxis in experimented animals which may be provoked by various serums and also by many other substances of a protein nature.

6. While the administration of antidiphtheria horse serum is usually devoid of danger, in rare instances persons who have been rendered hypersensitive by previous injections or in some hitherto unknown manner may be made alarmingly ill and may even die as the result of such injections.

7. Certain precautions should be observed in the injection of horse serum. Where there is a history of asthma, etc., the possible danger should be distinctly stated before serum is administered.

* Archives of Internal Medicine, June, 1909.

For the protection of other members of the profession who may meet similar experiences, all fatal cases should be reported.

8. The rare occurrence of unfavorable results from the use of antidiphtheria serum should not deter the physician from urging its administration in every case of diphtheria.

THE OPSONIC INDEX IN ACUTE ARTICULAR RHEUMATISM.*

RUTH TUNNICLIFF.
CHICAGO.

(From the Memorial Institute for Infectious Diseases, Chicago.)

From the study of eighteen cases of typical acute articular rheumatism, the following conclusions were drawn:

In acute articular rheumatism the opsonic index for *M. rheumaticus* (Beattie, Poynton and Paine) and *Strept. pyogenes* followed the same course. With involvement of new joints and rise in temperature the indices for both these organisms fell below normal. With improvement in the joints and symptoms the indices rose above normal.

The opsonic index for *Strept. viridans* isolated from the throat in acute rheumatism followed the same course as the index for *M. rheumaticus* and *Strept. pyogenes*.

The indices for *Staph. aureus*, pneumococcus, and a strain of *Strept. viridans* from a normal throat remained within the normal limits.

The opsonic index consequently does not help to differentiate *M. rheumaticus* from *Strept. pyogenes*.

A rabbit immunized with *M. rheumaticus* gave an increase in opsonin for *M. rheumaticus*, *Strept. pyogenes*, and *Strept. viridans* (rheumatism), but none for *Staph. aureus*, pneumococcus, and *Strept. viridans* (normal).

Agglutinins to both *Strept. pyogenes* and *M. rheumaticus* were demonstrated in the serum of seven of twelve rheumatism patients, the course of the agglutinins corresponding in general to that of the opsonic indices.

From the results of this study the conclusion seems warranted that streptococci play an essential part in acute articular rheumatism.

* The Journal of Infectious Diseases, June 12, 1909, No. 3, vi, 346-360.

PHLORIZIN GLYCOCHOLIA.*

R. T. WOODYATT, M.D.

CHICAGO.

Since Minkowski's discovery of the glycosuria causing action of the glucoside phlorizin until the most recent times it has been held by all observers except Pflüger that phlorizin causes glycosuria through a local action of the drug within the kidneys. Phlorizin diabetes has generally been looked upon as "kidney diabetes." How the drug acts is acknowledged to be a question; where the drug acts has been regarded as settled.

This belief is based on the fact that in phlorizin diabetes there is little or no excess of sugar in the blood, while in all other forms of diabetes there is such excess; that in birds, in which hyperglycemia causes no glycosuria, phlorizin nevertheless does, from which it follows that phlorizin glycosuria is independent of hyperglycemia; that injection of phlorizin directly into one renal artery causes sugar to appear in the urine of the injected kidney before it appears on the other side; in other words, that all of the necessary agents for the production of sugar excretion with phlorizin are present in the kidney itself. In addition to these points it has been shown that when phlorizin is administered to a bilaterally nephrectomized dog there is still no heaping up of sugar in the blood (no hyperglycemia); and it has also been shown that under the influence of phlorizin, sugar, subcutaneously injected into a healthy animal, may be quantitatively recovered in the urine. From these last two observations the conclusion has been reached not only that phlorizin acts in the kidneys but that it acts only in these organs and nowhere else.

This last conclusion is incorrect. It does not inevitably follow from the results of the experiments. It is not evident from all work heretofore reported that phlorizin cannot act on many other cells than those of the kidney. Sugar might be excreted into the gut and be reabsorbed to find ultimate elimination in the urine.

From its similarity in many respects to the kidney it might be expected that the liver would also excrete sugar under the influence of phlorizin. Experiments were accordingly made with biliary fistula dogs to settle the question. It was found that bile before phlorizin administration was virtually sugar-free—after administration definitely saccharine.

Therefore phlorizin does not act upon the kidneys alone. It was also found that dogs rendered glycogen-free still showed glycocholia

* Journal Biological Chemistry, January, 1910, vii, 2.

after phlorizin administration, indicating in harmony with what is known of the urinary sugar, that the source from which the biliary sugar is derived is protein.

(Fats do not increase the amount of sugar in the urine when fed to phlorizinized animals; proteins under similar conditions, however, can yield 60 per cent. of their own weight in glucose; carbohydrates as above stated may be quantitatively excreted in the urine.)

SOME UNUSUAL BACTERIA ASSOCIATED WITH URINARY INFECTIONS.*

DAVID J. DAVIS, M.D.

CHICAGO.

Three varieties are described:

Bacillus A was isolated in pure culture from the urine in two cases. It is very minute, gram negative, non-motile and hemolytic, and grows only on media containing red blood cells. It is not highly pathogenic for animals. The sera of the two cases gave high opsonic indices for the homologous bacilli, but did not specifically agglutinate them. Pus occurred in both cases in the urine.

Bacillus B was isolated in pure growth from the urine of a case of long-standing infection of the urinary tract associated with joint lesions. It is a small bacillus, gram negative, and non-motile, and grows much better under anaerobic conditions, though it is not a strict anaerobe. It is hemolytic, does not produce gas in glucose, slowly acidifies milk, and ferments mannite. The opsonic index of the patient was as a rule above normal, and his serum agglutinated the organism in low dilutions. It is not highly pathogenic for animals.

Bacillus C occurred in the urine mixed with *B. coli* in a case of long-standing urinary infection in a young woman. It was found also in urine obtained from both ureters and from the pelvis of the right kidney at the time a nephrotomy was made. It is a large gram positive bacillus, often occurring in chains. It is non-motile, does not form spores, and is strictly aerobic. It grows slowly and best on urine glucose media. It is not pathogenic for animals.

ACTINOMYCOSIS OF THE OVARIES AND TUBES.*

DAVID J. DAVIS, M.D.

CHICAGO.

A young girl, aged 19, in the service of Dr. Wagner at St. Joseph's Hospital, had abdominal symptoms for a number of years. Recently large masses developed in the region of the pelvis. The

* Transactions of Chicago Pathological Society, 1909.

tubes and ovaries were removed by operation, the uterus not being involved. Large abscesses were found in both ovaries, which contained thick fetid pus and possessed thick walls of dense connective tissue. The right tube in its outer two-thirds was much enlarged and contained thick pus. The left tube was adherent to the ovarian abscess, but the lumen was not involved.

Actinomyces were isolated in pure culture from the pus of the ovarian abscesses and from the right tube. They were also demonstrated in the cover-glass preparations of the pus and in tissue sections stained by Gram's method.

The atrium of infection was probably the intestinal canal. Twenty-four cases of actinomycosis of the uterine appendages are recorded in the literature, none of which have appeared in this country.

IMMUNE BODIES IN URINARY INFECTION WITH COLON BACILLI AND TREATMENT BY INOCULATION.*

DAVID J. DAVIS, M.D.

CHICAGO.

In cases of urinary infections the bacteria of the colon group vary markedly in certain details. Consequently, for inoculation treatment the homologous germ is preferable. The opsonic index may be raised by such inoculations. In certain cases the patient's serum may show a marked diminution or total absence of lytic bodies for the homologous bacilli as compared with normal serum, while the specific opsonins may be present in abundance. In certain cases opsonins seem to play little or no part in the distinction of colon bacilli in the urine.

Opsonification, bacteriolysis and agglutination in certain cases do not run parallel. The facts are most easily explained by assuming the existence of specific opsonins, lysins and agglutinins.

INFLUENZAL MENINGITIS.*

DAVID J. DAVIS, M.D.

CHICAGO.

Twin brothers became ill on the fifth day after birth; the cases ran an identical clinical course and terminated fatally on the ninth and eleventh days, respectively, after birth.

* The Journal of Infectious Diseases, 1909, vi, 224.

* Archives of Internal Medicine, 1909, iv, 323.

There was little or no distinct clinical evidence of meningeal involvement.

Autopsy on the first child revealed as the prominent lesions acute purulent leptomeningitis and acute enteritis.

From the meningeal exudate and from the peritoneal fluid pure cultures of *B. influenza* were obtained.

The usual atria of infection—nasal cavity, tympanic cavities, lungs, bronchi and throat—were normal. Omphalitis was not present. The intestinal tract is a suspicious portal of entry.

CLINICS, HOSPITALS AND SOCIETIES.

For the benefit of the members of the Alumni Association visiting Chicago, a list of Rush clinics is herewith appended. In addition thereto is given a list of some of the principal hospitals in the city, as well as the means by which they are reached, and the hours of their public clinics. There is also appended a list of various societies and their meeting places.

THE BULLETIN wishes to be perfectly impartial in this respect, giving not only information which directly concerns Rush Medical College, but any information which may be of interest to visiting alumni. It will be glad at any time to furnish upon application further information regarding any clinic in Chicago.

CLINICS—RUSH MEDICAL COLLEGE.

MONDAY.

9:00-11:00—Prof. Frank Billings.....	Medicine
11:00- 1:00—Prof. Arthur Dean Bevan.....	Surgery
2:00- 4:00—Prof. James Nevins Hyde.....	Dermatology
3:00- 4:00—Prof. William H. Wilder.....	Ophthalmology
4:00- 6:00—Prof. William T. Belfield.....	Genitourinary

TUESDAY.

9:00-11:00—Prof. Alfred Cleveland Cotton.....	Pediatrics
9:00-11:00—Prof. James B. Herrick (Cook County Hospital)...	Medicine
11:00- 1:00—Prof. Arthur Dean Bevan.....	Surgery

WEDNESDAY.

9:00-11:00—Prof. Bertram W. Sippy (Cook County Hospital)...	Medicine
11:00- 1:00—Prof. J. Clarence Webster.....	Gynecology
2:00- 4:00—Prof. Otto Tiger Freer.....	Laryngology

THURSDAY.

9:00-11:00—Prof. Frank Billings.....	Medicine
11:00- 1:00—Prof. Arthur Dean Bevan.....	Surgery
2:00- 4:00—Prof. James Nevins Hyde.....	Dermatology

FRIDAY.

9:00-11:00—Prof. Alfred Cleveland Cotton.....	Pediatrics
9:00-11:00—Prof. James B. Herrick (Rush).....	Medicine
11:00- 1:00—Asst. Prof. Dean De Witt Lewis.....	Surgery
2:00- 4:00—Prof. George E. Shambaugh.....	Otology
3:00- 4:00—Prof. William Hamlin Wilder.....	Ophthalmology
4:00- 6:00—Prof. William T. Belfield.....	Genitourinary

SATURDAY.

9:00-11:00—Prof. Bertram W. Sippy (Rush).....	Medicine
11:00- 1:00—Prof. J. Clarence Webster.....	Gynecology
2:00- 4:00—Prof. David W. Graham.....	Surgery

HOSPITALS.

AUGUSTANA—Lincoln avenue and Cleveland avenue.

Take the Lincoln avenue car to Cleveland avenue. Dr. Ochsner's surgical clinic daily, beginning at 7:45 a. m.

CHICAGO POLICLINIC—174 East Chicago avenue.

Take Northwestern Elevated train to Chicago avenue station; or Wells street car to Chicago avenue, and walk one-half block west. Clinics all day, from 9 a. m. until 6 p. m., in all branches.

COOK COUNTY—Harrison and Honore streets.

Adams street car direct to entrance. Van Buren street car to Honore, two blocks south. Metropolitan Elevated (Garfield Park) to Ogden avenue. Clinics: See special schedule.

ILLINOIS CHARITABLE EYE AND EAR INFIRMARY—227 West Adams street.

Take Adams street car to Morgan street; or Madison street car to Morgan street and walk two blocks south. Clinics daily, from 1:30 to 3 p. m.

MERCY HOSPITAL—Calumet avenue and Twenty-sixth street.

Take Indiana avenue car to Twenty-sixth street, walk two blocks east; or Cottage Grove avenue car to Twenty-sixth street, walk two blocks west. Clinics: Wednesday and Saturday at 9 a. m., Surgery; Monday and Thursday at 8 a. m., Surgery; Tuesday and Thursday, from 10 a. m. to 12 m., Medicine.

MICHAEL REESE—Twenty-ninth street and Groveland avenue.

Take Cottage Grove avenue car to Twenty-ninth street and walk one block east. No special clinics, but hospital always open to doctors.

POST-GRADUATE SCHOOL—2400 Dearborn street.

Take State street car to Twenty-fourth street, walk one block west; or South Side Elevated to Twenty-second street, walk one block west and two south. Clinics all day, from 8:30 a. m. to 5:30 p. m., in all branches.

PRESBYTERIAN—Corner Congress and Wood streets.

Take Adams street car to Wood street; or Van Buren street car to Wood street and walk one block south. Clinics: See Rush.

ST. LUKE'S—1439 Michigan avenue.

Take any car on Wabash avenue to Fourteenth street, walk one block east and one-half block south. Clinics: Wednesday, 9 a. m. to 12 m., Gynecology; Thursday, 8 to 10 a. m., Surgery; Thursday, 2 to 5 p. m., Eye and Ear. Clinicians variable.

WESLEY—2440 Dearborn street.

Take State street car to Twenty-fifth street and walk one block west. Clinics: Tuesday, 8 a. m., Gynecology; Tuesday, 4 p. m., Surgery; Wednesday, 8 a. m., Medicine; Thursday, 4 p. m., Surgery; Friday, 10 a. m., Nose and Throat; Saturday, 9 a. m., Surgery.

SOCIETIES.

Time and place of meeting of the Chicago Medical Society, its Branches and Affiliated Societies. Copied from *The Bulletin of the Chicago Medical Society*.

CHICAGO MEDICAL SOCIETY.—Northwestern University Building, Lake and Dearborn streets; every Wednesday evening at 8:30 o'clock (except July, August and September).

1. North Side Branch.—Red Star Inn, 1538 N. Clark street; 8:30 p. m., second Friday of month. Telephone North, 3942.

2. North Shore Branch.—Bismarck Garden, N. Halsted and Grace streets; 8:30 p. m., first Tuesday of month. Telephone L. V. 633.

3. Evanston Branch.—Avenue House; 8:30 p. m., fourth Thursday of month. Telephone Evanston 1110.

4. Northwest Branch.—Northwestern University Settlement, Augusta and Noble streets; 9 p. m., first Friday of month. Telephone Monroe 1717.

5. West Side Branch.—Cook County Hospital; 8:30 p. m., second Monday of month. Telephone West 171.

6. Aux Plaines Branch.—Alternating between Oak Park Hospital and Maywood Hospital; 8:30 p. m., fourth Friday of month. Telephone O. P. 600 and Maywood 5.

7. Douglas Park Branch.—Gads Hill Center, Twentieth and Robey streets; 8:30 p. m., first Tuesday of month. Telephone Canal 963.

8. Stock Yards Branch.—Peoples Bank Building, Forty-seventh street and Ashland avenue; 9 p. m., first and third Thursdays of month. Telephone Yards 1575.

9. Englewood Branch.—Englewood Hospital, Sixtieth and Green streets; 9 p. m., first Tuesday of month. Telephone Wentworth 342.

10. South Side Branch.—Drexel Hall, Fortieth street and Cottage Grove avenue; 8:15 p. m., October 30, November 30, December 30, January 31, February —, March 29, April 30, May 31, June 30. Telephone Douglas 1609.

11. South Chicago Branch.—9154 Commercial avenue; 8:30 p. m., third Tuesday of month. Telephone S. C. 1077.

12. Northwest Suburban Branch.—Alternating between offices of Dr. Ferguson, Irving Park and Dr. Earle, Des Plaines; 4 p. m., second Monday of month. Telephones Irving Park 35, and Des Plaines 1.

13. Chicago Heights Branch.—93 Illinois street; 8:30 p. m., first Tuesday of month. Telephone C. H. 2124.

14. Calumet Branch.—11245 Michigan avenue; 8:30 p. m., second Thursday of month. Telephone W. P. 43.

CHICAGO GYNECOLOGICAL SOCIETY.—Northwestern University Building; 8 p. m., third Friday of month.

CHICAGO DERMATOLOGICAL SOCIETY.—Meeting place variable; 3:30 p. m., third Friday of month.

CHICAGO UROLOGICAL SOCIETY.—800 Schiller Building; 8 p. m., last Thursday of month. Telephone Central 1779.

CHICAGO LARYNGOLOGICAL AND OTOLOGICAL SOCIETY.—Great Northern Hotel, Parlor L 38; 8 p. m., second Tuesday of month. Telephone Harrison 7904.

CHICAGO MEDICOLEGAL SOCIETY.—Meetings subject to call of Executive Committee.

CHICAGO NEUROLOGICAL SOCIETY.—Bismarck, 180 East Randolph street; 8 p. m., fourth Thursday of month. Telephone Franklin 522.

CHICAGO OPHTHALMOLOGICAL SOCIETY.—Great Northern Hotel; 8 p. m., second Monday of month. Telephone Harrison 7904.

CHICAGO PATHOLOGICAL SOCIETY.—Northwestern University Building; 8 p. m., second Monday of month. Telephone Central 4486.

CHICAGO PEDIATRIC SOCIETY.—Meeting place variable, 8 p. m., third Tuesday of month. Telephone Harrison 7904.

CHICAGO ORTHOPEDIC SOCIETY.—Meeting place variable; 8 p. m., second Thursday of month.

CHICAGO SURGICAL SOCIETY.—Northwestern University Building; 8 p. m., first Friday of month.

COLLEGE NOTES.

At the commencement exercises on Monday, Dec. 20, 1909, the following men received the degree of Medicinæ Doctor from Rush Medical College:

Albert Howard Baugher.
Walter Eugene Garrey.
Arthur Stanley Granger.
Willard Elizabeth Park.
William Henry Rowe, Jr.
Charles Schott.

The tenth annual report of the Library of Rush Medical College, covering the period between June 30, 1908, and June 30, 1909, shows the following statistics:

Number of periodicals on file.....	195
Number of books consulted	51,967
Number of volumes bought	177
Number of pamphlets bought	0
Number of volumes given	1,508
Number of pamphlets given	809
Number of books and pamphlets in the Library June 30, 1908.....	17,253
Number of books accessioned during the year.....	987
Number of pamphlets accessioned during the year.....	73
Total books and pamphlets in the Library June 30, 1909.....	18,313

In the list of donors appear the following names of those who have contributed 25 or more volumes:

Armour & Co., Chicago, Ill.....	25
Brower, Dr. D. R., Chicago, Ill.....	99
Camp, Dr. C. D., Chicago, Ill.....	50
Cotton, Dr. A. C., Chicago, Ill.....	121
Dimmitt, Dr. F. W., Red Wing, Minn.....	47
Dodson, Dr. N. M., Berlin, Wis.....	212
Hektoen, Dr. L., Chicago, Ill.....	47
Klebs, Dr. A., Chicago, Ill.....	72
Knapp, Dr. A. A., and Farnum, Dr. C. G., Brimfield, Ill.....	54
Parkes, Dr. C. H., Chicago, Ill.....	410
Plecker, Dr. J. H., Chicago, Ill.....	88
TenBroeck, Dr. W. H., Paris, Ill.....	26
Webster, Dr. J. C., Chicago, Ill.....	111
Winslow, Mrs. Rush, Racine, Ill.....	174

ALUMNI NOTES.

Our former treasurer, Dr. David Fiske, was married Nov. 9, 1909, to Miss Mary Hinman, of Chicago. THE BULLETIN extends its hearty congratulations.

Dr. Tucker, '01, who, with his wife, Dr. Emma Tucker, is at present located at Pangkiachwang, China, sends a little pamphlet giving a résumé of the work done in the hospital there. Dr. Tucker's friends in the Alumni Association will be glad to learn that he is meeting with success in his chosen field of practice. In sending his dues, Dr. Tucker says: "You must appreciate this dollar bill, as it is the only one I have seen for many years in this land, and it may be years before another turns up in this region."

Dr. W. A. Hemingway, '01, and Dr. T. J. O. Gattrell, '00, are in China—the former at Taiku, Shansi, and the latter at Tientsin.

Dr. Everett H. Butterfield, '84, one of the founders and former Medical Director of the Ottawa Tent Colony, announces his association as Medical Director with the Buffalo Rock Sanitarium of Ottawa, Ill., an institution for the treatment of pulmonary tuberculosis.

CORRESPONDENCE.

Dr. E. T. Spotswood, '51, of Terre Haute, Ind., in a communication to THE BULLETIN, writes as follows:

"I am the oldest graduate of Rush that I know of, having graduated in 1851. I am now 83 years of age. I was in practice for 54 years; was in the Army as the surgeon of an Indiana cavalry regiment. I have just now completed a walk of four miles, and you see that my hand does not tremble very much, notwithstanding my age and the exercise."

Owing to the lack of sufficient data, the necrologist's report concerning the death of Dr. Frank W. Epley, '77, was quite meager. Additional information is herewith given at the request of his widow.

To the Editor:—By chance the report of the death of my husband, the late Dr. F. W. Epley, came to my notice. I am sorry to see the report published with such meagerness of data. Will you kindly report it in your next issue as follows: Frank W. Epley, M.D., 1877. A member of the American Medical Association, Society of American Railway Surgeons, Wisconsin State Medical Society, Honorary Member Minnesota State Medical Society and Fox River Valley Association. Many years secretary of the local Inter County Medical Association.

He was a Knight Templar, an active member of the Congregational Church. For two years mayor of his home city, in the interest of which he did much faithful and strenuous work. For a year preceding the accident which resulted in his death he suffered from nervous exhaustion brought on by overwork.

To the Editor:—Your letter of yesterday has brought to my mind the question, "How many of the Alumni of Old Rush know why the names are in the window in the front of the original Rush College building?" All have seen them, many wondered, but how many know? I remember only three (I think there are five), Lyman, Case, Higday. [There is but one other, Adams being the

fourth.—Ed.] What did they do to be so honored? Let me tell you. The fire of 1871 had destroyed Old Rush, money was scarce and Rush must be rebuilt. A call went out for help and these men responded by helping Rush with \$500 cash each. I think all Alumni should know the history of this window.

At our last reunion all were delighted to listen to the playing of Otto and Marie Meyer, and they played because they wished to show their love for Old Rush, which is very natural. Their great-uncle was Dr. Higday, whose name is in the window; their father is ex-president of Rush Alumni, Dr. J. H. W. Meyer, '76, Laporte, Ind.; their brother is Dr. J. H. W. Meyer, '07, now in Denver, Colo.

On Feb. 13, 1909, Otto Meyer will give his first recital in Chicago in Music Hall, under the management of F. Wight Newman. Many Rush Alumni may wish to hear again this young artist who proved so acceptable at the last reunion. Fraternally,

J. H. W. MEYER, '76, Laporte, Ind.

EDITORIAL NOTES.

The Alumni Association is at present in the embarrassing predicament of being without funds. It is therefore necessary to urge the members to promptly pay their dues in order that the running expenses of the Association may be met. When one stops to consider that it costs approximately \$240 for each issue of *THE BULLETIN*, it is very apparent that dues must be collected to the last dollar in order to come out even. No one should get the impression that he is paying a dollar a year for *THE BULLETIN* alone, for that is not the case. The dollar is for membership in the Alumni Association, the support of which should be a pleasure to every alumnus of Old Rush, and *THE BULLETIN* is simply the mouthpiece of the organization through which all are allowed to speak.

Each member who receives the pink slip in this issue of *THE BULLETIN* is in arrears with his dues, and is earnestly requested to remit at his earliest possible convenience.

A typographical error in the Editorial Notes of the October issue of *THE BULLETIN* gives credit for the original article of Dr. Boughton to "Dr. Broughton." The editor thanks Dr. Boughton for calling his attention to the mistake.

An effort was made to have *THE BULLETIN* entered as second-class matter, in order to reduce the expense of issuing it. This, however, was found impracticable, and we will continue to pay postage as heretofore.

The communication printed below was sent to the members of the Alumni committees and others. It applies equally as well to all members of the Alumni Association. Although nearly fifty letters were sent out, but one single reply was received.

No one realizes what it means to gather together material for a publication unless he has had some personal experience along that line, and the editor trusts this appeal may not be ignored.

Dr. Ormsby, our necrologist, is particularly anxious to have as complete data as possible regarding the death of any alumnus of Rush. He must, as a rule, depend upon notices in the various journals for his information, and these reports are sometimes quite meager. The following is the letter:

"Dear Doctor:—In order to make THE BULLETIN a success, it will be necessary to call upon the members of the Association for material.

"Any items concerning Alumni reunions (with list of names of those present), or items concerning individuals—deaths, marriages, births, appointments, etc.—will be gladly received.

"If you have done anything in the literary line—written a book, contributed some article to a journal, or know of any alumnus who has—we would like to make note of it. If the article is not too long, room for an abstract of it might be found.

"If you care to air your views on any subject, you can reach a good many men through THE BULLETIN, as 4,300 copies are sent out at each issue.

"Kindly keep this request in mind and have the interests of the Alumni Association at heart—that also means the interests of Rush. The better THE BULLETIN is, the more credit it reflects upon the college; and the better the college is, the more credit it is to be an alumnus of it. Rush is becoming a higher class college every year, and a good live BULLETIN will help to stimulate its growth."

Among the older Alumni who have remitted their dues during the past year are the following:

L. F. Babcock, '64, Deadwood, S. D.	C. H. Hamilton, '73, Dubuque, Ia.
W. H. H. Hagey, '68, Norfolk, Neb.	J. E. Cowan, '74, Galesburg, Ill.
G. W. Roberts, '69, Albany, Wis.	Wm. Treacy, '77, Helena, Mont.
F. T. Bicknell, '69-'70, Los Angeles.	

The President of the American Gynecological Society has appointed a committee to report at the next annual meeting in

Washington, on the Present Status of Obstetrical Teaching in Europe and America, and to recommend improvements in the scope and character of the teaching of obstetrics in America.

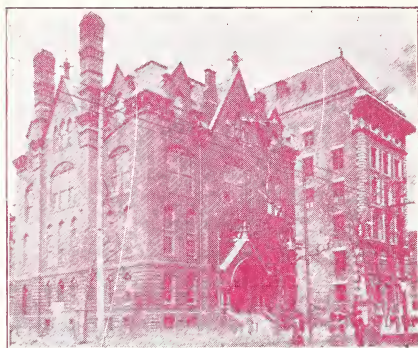
The committee consists of the Professors of Obstetrics in Columbia University, University of Pennsylvania, Harvard, Jefferson Medical College, Johns Hopkins University, Cornell University and the University of Chicago.

Communications from anyone interested in the subject will be gladly received by the chairman of the committee, Dr. B. C. Hirst, 1821 Spruce street, Philadelphia, Pa.

The following have been received and referred to the Library of the Rush Medical College:

Reprints: Rational System of Medical Education, Leartus Connor, Detroit; Simple Refraction for Physicians, Leartus Connor, Detroit; The Temporal Bone: The Diseases to which It is Subject, with Especial Reference to Otitis Media, Franklin E. Wallace, Pueblo.

Owing to the fault of inexperienced help in the office of the distributor of THE BULLETIN, as well as to the recent change in house numbers in Chicago, many alumni failed to receive the October issue of THE BULLETIN. Copies of this issue may be had upon application to the Secretary of the Association.



RUSH MEDICAL COLLEGE AND SENN HALL



LABORATORY



PRESBYTERIAN HOSPITAL

LIBRARY OF
RUSH MEDICAL COLLEGE.

The Bulletin

OF THE

ALUMNI ASSOCIATION

OF

RUSH MEDICAL COLLEGE

Vol. VI

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No. 3



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The Bulletin

of the

ALUMNI ASSOCIATION OF RUSH MEDICAL COLLEGE.

Volume VI

April, 1910

No. 3

ALFRED N. MURRAY, Editor - - - 100 State Street, CHICAGO, ILL.

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TABLE OF CONTENTS

	PAGE.
Program of Commencement Week.....	5
Biographies of the Class of 1910.....	6
Hospital Appointments	13
County Internes for 1910.....	13
Clinics, Hospitals and Societies.....	14
Alumni Notes	17
Class of '90, Rush Medical College, Twentieth Anniversary Reunion....	19
Biographical Sketches, Class of 1890.....	23
A Little Humor Now and Then.....	29
Editorial Notes	31

The Library of Rush Medical will be glad to send for any medical books, journals or reprints which you may wish to dispose of. Notify the Librarian by postal or telephone.

REGISTRAR,

Rush Medical College,

1746 West Harrison Street, Chicago, Ill.

DEAR SIR:—Please reserve for me — tickets (\$1.50 each) for the theater party, Tuesday night, June 14, 1910. Also — tickets (\$1.50 each) for me at Alumni and Faculty Banquet, Wednesday night, June 15, 1910, for which please find enclosed \$——.

Name.....

Address.....

Class (Be sure and specify class.)

Make disposition of tickets as follows:

Keep for		Have at place		Mail to
me at college.		of meeting.		me.

Note.—Check the disposition you wish made of the tickets. Marked places will be reserved for you at a table with your class if you will send in word at once on this slip, and specify class.

PROGRAM OF COMMENCEMENT WEEK

Sunday, June 12, 1910.

3 p. m. Baccalaureate sermon Upper Amphitheater, Rush Medical College.

Monday, June 13, 1910.

SPECIAL CLINICS.

9:00-11:00—Prof. Frank Billings.....Medicine
11:00- 1:00—Prof. Arthur Dean Bevan.....Surgery
2:00- 4:00—Prof. James Nevins Hyde.....Dermatology
3:00- 4:00—Prof. William H. Wilder.....Ophthalmology
4:00- 6:00—Prof. William T. Belfield.....Genitourinary

Tuesday, June 14, 1910.

SPECIAL CLINICS.

9:00-11:00 (Cook County Hospital)—Prof. James Bryan Herrick.....
.....General Medicine
9:10-11:00—Prof. Alfred Cleveland Cotton.....Pediatrics
and Prof. John Milton Dodson
11:00- 1:00—Prof. John Ridlon.....Orthopedic Surgery

CLASS DAY EXERCISES

3:00—Upper Amphitheater Rush Medical College.

PROGRAM

Invocation.....Robert Clifton Reimche
Violin Solo....."Canzonetta," A. d'Ambrosia
Melbourne Clements.

Presentation of Class Tablet.....J. Guy Strohm
Address.....Prof. James Bryan Herrick
Violincello Solo.....
(a) "Romance (Sans Paroles)".....Van Goens
(b) "Le Cygne".....Saint Saëns
Oswald George Stark.

Class Prophecy.....Nicholas Bacon Wagner
Vocal Duet—"Flow Gently, Deva".....Parry
H. Augustine Smith.
William Wesley Peter.

Valedictory Address.....Franklin Chambers McLean
Violin and Cello Duet.....Selected
Messrs. Stark and Clements.

Benediction.....Robert Clifton Reimche

8:00. Annual Theater Party for the Graduating Class, Faculty and Alumni, at the Garrick, Randolph Street, between Clark and Dearborn. A comedy entitled "The Lottery Man."

Wednesday, June 15, 1910.

SPECIAL CLINICS.

- 9:00-11:00—Prof. Bertram W. Sippy (Cook County Hospital) . . . Medicine
 11:00- 1:00—Prof. J. Clarence Webster Gynecology
 3:00. Graduating Exercises: Address by Dr. William Mayo, of Rochester, Minn., at Mandel Hall, University of Chicago, corner of Fifty-seventh Street and Lexington Avenue.
 5:00. Annual business meeting in the parlor of the Auditorium Hotel.
 6:30. Reception of the Alumni Association following.
 7:00. Combined dinner of the Alumni and Faculty to the Graduating Class, Banquet Hall, Auditorium Hotel, Dr. R. L. Leonard, '69, presiding. Addresses by representatives of the University of Chicago, the Law, the Clergy, the Alumni, and the Class of 1910.

Thursday, June 16, 1910.

During the next two weeks special clinics for the benefit of the Alumni will be held by the heads of the departments.

BIOGRAPHIES OF THE CLASS OF 1910

CLASS OFFICERS.

- PRESIDENT John L. Treacy
 FIRST VICE-PRESIDENT Charles H. Swift
 SECOND VICE-PRESIDENT Fletcher O. McFarland
 SECRETARY Herbert R. Mills
 TREASURER Harrison A. Lyding
 CHAPLAIN Robert C. Reimche
 CHORISTER William W. Peter
 VALEDICTORIAN Franklin C. McLean
 POET Ralph S. Fisher
 HISTORIAN Alvin C. Tanner
 PROPHET Nicholas B. Wagner
 EXECUTIVE COMMITTEE—Harry R. Hoffman, Chairman; Emanuel Z. Shapiro, Lafayette Rees.
 COUNCILORS—Frederick H. Falls, George M. Crabb, Martha A. Welpton.

Note.—Letters refer to church affiliation. B.—Baptist. C.—Congregational. C. R.—Christian Reformed. E.—Episcopal. J.—Jewish. M.—Methodist. U.—Unitarian. U. C.—University Congregational. U. P.—United Presbyterian. P.—Presbyterian. P. E.—Protestant Episcopal. R. C.—Roman Catholic. All graduates single unless otherwise indicated.

Arthur Noble Aitken, Newcastle, New Brunswick, Canada. Born at Newcastle, Jan. 25, 1883. Prepared at Hawkins Academy, and University of Chicago. Fraternity Phi Kappa Sigma. Entered Rush 1905. Internship St. Luke's, June 1, 1910. P.

Donald Putnam Abbott, Chicago. Born at Brookline, Mass., April 15, 1884. Prepared at Hyde Park High School, and University of Chicago (A. B. 1907). Fraternity Delta Kappa Epsilon, Nu Sigma Nu. Entered Rush 1906. Internship Cook County Hospital June 1, 1910. U. C.

August Harvey Bauer, Chicago. Born at Chicago, June 5, 1883. Pharmacist. Prepared at University of Illinois Academy, Chicago College of Pharmacy of University of Illinois; University of Illinois (Ph. G. 1903; S. B. 1908). Biroth Prize (College of Pharmacy). Fraternity Alpha Kappa Kappa. Previous medical education Physicians and Surgeons, Chicago. Entered Rush 1907.

Robert Louis Benson, Mount Morris, Mich. Born at Flint, Mich., 1880. Prepared at Saginaw, Michigan High School, University of Michigan (A. B. 1902, A. M. 1904). Entered Rush January, 1906. Fellow in Pathology University of Chicago. Fraternities, Phi Beta Pi, Sigma Chi, Gamma Alpha. R. C.

Archie E. Brimmer, St. Paul, Minn. Born at Woolstock, Iowa, Feb. 16, 1883. Prepared at St. Paul Central High School, and University of Minnesota (B. S. 1907). Previous medical education, University of Minnesota. Entered Rush October, 1909. Fraternity, Phi Rho Sigma. Internship Minneapolis City Hospital, July 15, 1910. B.

Cecil Floyd Charlton, Loup City, Neb. Born at Arcadia, Neb., Oct. 26, 1886. Prepared at University of Nebraska (B. S. 1908). Previous medical education, University of Nebraska College of Medicine. Entered Rush October, 1908. Fraternity, Nu Sigma Nu. Internship Cook County Hospital, Dec. 1, 1910.

Melbourne Clements, Nashville, Tenn. Born at Uniontown, Ky., Nov. 23, 1879. Prepared at Montgomery Bell Academy, Nashville, Tenn., and University of Chicago (S.B. 1908). Entered Rush spring 1906. Fraternity, Phi Rho Sigma. Internship Cook County Hospital, June, 1910.

Edward Lyman Cornell, Chicago. Born at Chicago, Aug. 9, 1883. Prepared at St. John Military Academy, and University of Chicago (S. B. 1907). Entered Rush 1902. Fraternity, Kappa Epsilon, Nu Sigma Nu. Chairman entertainment committee. Internship Cook County Hospital, December, 1910. C.

George Melville Crabb, Parsons, Kan. Born at Greenfield, Iowa, Oct. 16, 1882. Prepared at Grinnell (Iowa) College (S. B. 1906). Scholarship in Anatomy. Entered Rush October, 1906. Fraternity, Phi Beta Pi. Internship Cook County Hospital, June 1, 1910. P.

Julia Crotty, Crotty, Kan. Born at Crotty, Kan., Dec. 16, 1879. Prepared at Wells College (A. B. 1898). Entered Rush October, 1906.

Richard B. Dillehunt, Decatur, Ill. Born at Decatur, Ill., 1886. Prepared at Decatur High School, and University of Illinois. Entered Rush 1906. Fraternity, Phi Rho Sigma. Internship Cook County Hospital, June, 1910. M.

Erastus Smith Edgerton, Galesburg, Ill. Born at Galesburg, Ill., June 30, 1884. Prepared at Galesburg High School and Knox College (B.S. 1905). Entered Rush October, 1906. Fraternities, Phi Delta Theta, Nu Sigma Nu, Alpha Mega Alpha. Internship at Presbyterian Hospital.

Frederick H. Falls, Chicago. Born at Chicago, Dec. 14, 1886. Prepared at Lewis Institute and University of Chicago (S.B. 1908). Entered Rush October, 1906. Fraternity, Phi Theta Epsilon. Class councilor. Internship Cook County Hospital, June 1, 1910. E.

Ralph Stephen Fisher, Portland, Ore. Born at Astoria, Ore., Nov. 23 1880. Prepared at the Dalles High School, University of Oregon, and Stanford University. Previous medical education, University of Oregon Medical, University of Paris, Medical. Entered Rush September, 1904. Fraternities, Delta Kappa Epsilon, Nu Sigma Nu.

Robert E. Flynn, Caledonia, Minn. Born at Caledonia, 1882. Prepared at Caledonia High School, and University of Minnesota. Previous medical education, University of Minnesota. Entered Rush October, 1909. Fraternity, Alpha Kappa Kappa.

Earle Bloodgood Fowler, Oak Park, Ill. Born at Chicago, Dec. 7, 1884. Prepared at Oak Park High School, and Dartmouth (B.S. 1907). Previous medical education, Dartmouth. Entered Rush January, 1907. Fraternities, Phi Delta Theta, and Nu Sigma Nu. Internship at Cook County Hospital, December, 1910. P.

Walter Eugene Garrey, San Francisco, Cal. Born 1873. Prepared at Taurence University, and University of Chicago (B. S. 1894, Ph. D. 1900). Previous medical education, Cooper Medical College (professor of physiology). Entered Rush 1904.

Ralph Towns Gilchrist, Oskaloosa, Iowa. Born at Oskaloosa, Iowa, March 19, 1882. Prepared at Penn College Academy and Penn College (S.B. 1906). Entered Rush July, 1906. Internship Milwaukee County Hospital, April, 1910.

Johnson Francis Hammond, Coshocton, Ohio. Born at Ostego, Ohio, Dec. 7, 1881. Prepared at Wooster Academy and University of Wooster. Entered Rush September, 1906. Fraternity, Alpha Kappa Kappa.

Franz Heinrich Harms, Chicago. Born at Chicago, July 12, 1875. Prepared at North Division High School, and University of Chicago (Ph. B. 1898). Previous medical education, University of Paris, France; University of Berlin, Germany. Special work, pathology at Friedrichsheim, Berlin. Entered Rush October, 1904. Fraternities, Delta Kappa Epsilon, Nu Sigma Nu. A. F. and A. M. Church, St. Paul's German Lutheran.

Henry Ray Hatch, Heber, Utah. Born at Ashley, Utah, April 20, 1886. Prepared at University of Utah (A.B. 1908). Previous medical education, University of Utah Medical Department. Entered Rush 1908. Married. Church of Latterday Saints.

Clarence Clyde Hickman, Lincoln, Neb. Born at Marquette, Mich., Dec. 27, 1883. Prepared at Waverly High School, Lincoln High School and University of Nebraska. Previous medical education, University of Nebraska. Entered Rush October, 1908. Fraternity, Phi Rho Sigma. Internship Cook County Hospital, December, 1910.

Harry Richard Hoffman, Chicago. Born at Norfolk, Va., July 4, 1887. Prepared at West Division High School, Chicago and University of Chicago (S. B. 1908). Entered Rush October, 1906. Chairman executive committee. Internship St. Luke's Hospital, June, 1910. J.

William H. Jamieson, Schullsburg, Wis. Born at Schullsburg, Wis. Prepared at University of Wisconsin (B. L. 1901). Post-graduate work at Harvard and University of Chicago. Entered Rush June, 1906. Fraternities, Phi Beta Kappa, Phi Beta Pi. Internship St. Luke's Hospital, June, 1910.

Clarence Arthur Johnson, Topeka, Kan. Born at Silver Lake, Kan., Oct. 19, 1880. Assistant state librarian for Kansas. Prepared at Topeka High School and Washburn College, Topeka (A.B. 1906). Previous medical education, Johns Hopkins. Entered Rush October, 1908. Special work: special laboratory pathology, Johns Hopkins; special bacteriology, University of Chicago. Fraternities, Delta Omricon Omricon, Gamma Sigma (literary), Phi Beta Pi. Internship Kansas City General Hospital, July, 1910. M.

Edwin Garvey Kirk, Chicago. Born at Lima, Ohio, Oct. 25, 1879. Prepared at Lima High School, and University of Chicago (B.B. 1902, Ph.D. 1907). Scholarship and special honors: Phi Beta Kappa honorary Fraternity, Woods Holl scholarship, Fellow in Pathology and Fellow in Anatomy. Following activities in University of Chicago: Assistant in Zoology, 1902-3; Fellow in Anatomy, 1903-5; Fellow in Pathology, summer 1905; assistant in Anatomy, 1906-7; associate in Anatomy, 1907-8; instructor in Anatomy, 1908. Entered Rush October, 1904. Graduated in August, 1909. Fraternities, etc.: Member Association of American Anatomists, Phi Beta Pi, Alpha Omega Alpha. Internship Presbyterian Hospital, June, 1910. Married.

Arthur Nuta Kitenplon. Born at Berlad, Romania, April, 1885. Prepared at Berlad High School, and Liceum Codreaun, Berlad. Previous medical education, Dearborn Medical College. Entered Rush October, 1908. Internship St. Charles Hospital, Aurora, Ill.

Julius Ernest Lackner, Chicago. Born at Chicago, Feb. 28, 1887. Prepared at high school and University of Chicago (B.S., 1907). Previous medical education, Northwestern, Chicago. Entered Rush, 1903. Fraternities, Sigma Chi, Nu Sigma Nu. Internship Michael Reese Hospital. E.

Schuyler Colfax Lambert, Omaha, Neb. Born at Neligh, Neb., Aug. 30, 1876. Prepared at Gates Academy Neligh, and University of Nebraska (A.B., 1906). Previous medical education, University of Nebraska, Omaha Medical College. Entered Rush, 1906.

Charles Wilson Lamme, Chicago. Born at El Paso, Ill., April 20, 1880. Prepared at Lead City High School and Park College, Mo. (A.B., 1903), Princeton Graduate Schools (A.M., 1906), University of Chicago (S.B., 1908). Activities: Scholarship in Anatomy, University of Chicago, 1907; Laboratory Assistant Anatomy, University of Chicago, 1908. Previous medical education, Physicians and Surgeons College, Kansas City. Entered Rush March, 1904. Fraternities, Gamma Alpha (University of Chicago), Phi Beta Pi. Internship Children's Memorial Hospital, March-September, 1910.

Thor Bech Lude, Rainy River, Ontario, Canada. Born Bergen, Norway, Feb. 4, 1881. Prepared at Grand Forks High School, University of North Dakota, University of Chicago. Previous medical education, University of Chicago, University of North Dakota. Entered Rush October, 1908. P.

Harrison Andrew Lyding, Peoria, Ill. Born at Peoria, Ill., Oct. 7, 1887. Prepared at Peoria High School, Bradley Polytechnic (Associate in Sciences, 1906). Entered Rush, September 1906. Internship Michael Reese Hospital, June, 1910.

Joannes Elias Mavros, Cairo, Egypt. Born at Syros, Greece, October, 1885. Prepared at high school and college (A.B., 1906). Has eight medals in athletics. Previous medical education, Beirut American College, Entered Rush, June, 1908. Special work in physiology at Beirut. Internship Columbus Hospital, June, 1910. Greek Church. Traveled in Europe, Asia, Africa and America.

Fletcher Olin McFarland, Danville, Ill. Born Danville, May 28, 1886. Prepared at Danville High School, De Pauw University and University of Chicago (B.S. 1908). Entered Rush October, 1906. Fraternities, Delta Kappa Epsilon, Phi Rho Sigma. Internship St. Luke's Hospital June, 1910.

John Francis McKie, Northboro, Iowa. Born in Page county, Iowa, Sept. 4, 1882. Prepared Tarkio College (B.S., 1906). Entered Rush, 1906. Fraternity, Phi Chi. Internship Cook County Hospital, December, 1910. B.

William George McKay, Evanston, Ill. Born at Ingersoll, Ontario, Canada, July 23, 1880. Prepared at Rembeck (Iowa) high school and Iowa State College (B.S., 1898, M.S., 1906). Scholarship in Bacteriology Iowa State University. Previous medical education, Iowa State University. Entered Rush, October, 1908. Fraternity, Phi Beta Pi. Special work. Assistant in Bacteriology, University of Iowa. Internship Children's Memorial Hospital, January, 1910. C.

Franklin Chambers McLean, Maroa, Ill. Born at Maroa, Feb. 29, 1888. Prepared at Maroa High School and University of Chicago (S.B. 1907). Entered Rush 1906. Fraternities, Gamma Alpha, Phi Beta Kappa, Sigma Zeta, Phi Rho Sigma, Alpha Omega Alpha. Internship Cook County Hospital, June, 1910. P.

Herbert R. Mills, Mount Vernon, Iowa. Born at Albion, Mich., 1883. Prepared at Ulster Academy, Cornell College (S.B. 1906). Entered Rush September, 1906. Fraternities, Delta Tau Delta, Phi Beta Pi. Class secretary.

Robert Edgar Miltenberger, Randolph, Wis. Born at Randolph, Oct. 28, 1879. Prepared at Randolph High School and University of Wisconsin (B.A. 1906). Entered Rush October, 1906. Internship Bridewell, Chicago, June, 1910.

Aldebert Montague Moody, Shaniko,, Ore. Prepared at Behmont School, Stanford, and University of Chicago (S.B. 1908). Entered Rush April, 1906. Fraternities, Alpha Omega Alpha, Sigma Chi, Nu Sigma Nu. Married. Internship Presbyterian Hospital, September, 1910.

John Beverly Moore, Benton, Ill. Born at Benton, April 15, 1884. Prepared at Benton High School, University of Illinois (A.B. 1908). Previous medical education University of Illinois. Entered Rush September, 1907. Fraternity, Phi Rho Sigma. Internship Cook County Hospital, June, 1910.

Edward Parker Moser, Eldora, Iowa. Born at Eldora, May 7, 1879. Prepared at Iowa University. Previous medical education, University Medical College, Kansas City. Entered Rush March, 1909. Fraternity, Alpha Kappa Kappa. Internship St. Mary's Hospital, Rochester, Minn.

Louis Manning Munson, Mendota, Ill. Born at Fairview, Neb., Dec. 26, 1885. Prepared at Mendota High School and University of Chicago. Entered Rush October, 1906. Internship St. Luke's Hospital, June, 1910.

Frank Clay Murrah, Creal Springs, Ill. Born at Frankfort, Ill., Sept. 2, 1881. Prepared at Creal Springs College and University of Chicago (S.B. 1908). Entered Rush October, 1906. Fraternity, Phi Chi. Internship Bridewell, Chicago. B.

Fred Blue Olentine, Muskogee, Okla. Born at Lodge, Ill., Oct. 15, 1884. Prepared at Oklahoma Agricultural and Mechanical (S.B. 1906). Entered Rush October, 1906. Fraternity, Alpha Kappa Kappa. Internship St. Anthony's Hospital, June, 1910. C.

Willard Elizabeth Park, Jacksonville, Texas. Born at Jacksonville, Texas. Prepared at Huntsville State Normal and University of Texas. Previous medical education, Illinois Medical College and Physicians and Surgeons College. Entered Rush 1907. Internship Children's Memorial Hospital.

Arthur Columbia Pearman, Champaign, Ill. Born at Champaign, Nov. 20, 1884. Prepared at Champaign High School and University of Illinois (A.B. 1908). Entered Rush 1906. Fraternities, Delta Tau Delta, Phi Rho Sigma. Internship Cook County Hospital, December, 1910. P. E.

Clarence Axtell Penman, Beaumont, Texas. Born at Chicago, April 26, 1885. Prepared at East Chicago High School and University of Michigan (A.B. 1907). Previous medical education, University of Michigan. Entered Rush January, 1909. Fraternity, Phi Beta Pi. Internship Cook County Hospital, June, 1910. M.

Irving Perrill, Chicago. Born at Chicago, Feb. 23, 1885. Prepared at John Marshall High School, Lewis Institute, University of Chicago (S.B. 1908). Entered Rush October, 1906. Fraternity, Phi Rho Sigma. Chairman of program committee. Married. Internship Chicago Polyclinic Hospital, May, 1910. C.

William Wesley Peter, Chicago. Born at Elliston, Ohio, Dec. 1, 1882. Future location, China. Prepared at Northwestern Preparatory and Northwestern College (Ph.B. 1904, Ph.M. 1906). Previous medical education, University of Vermont (prosector in anatomy; assistant, bacteriological laboratory). Entered Rush October, 1908. Fraternity, Delta Nu. Chorister. Internship at St. Vincent's Hospital, Toledo, Ohio, July, 1910. Evangelical Association. Traveled in Europe.

La Fayette Rees, Wales, Utah. Born at Wales, Utah, Oct. 21, 1879. Prepared at Brigham Young University, Provo, Utah, University of Utah (A.B.Bpd. 1908). Previous medical education, University of Utah. Special work, Botanical, Zoological Expedition to South America. Entered Rush September, 1908. Fraternity, A.M. Internship Central Utah Hospital, Mount Pleasant, Utah, June, 1910. Married. Church, Latter-Day Saints. Traveled in South America.

Robert Clifton Reimche, College View, Neb. Born at Wittenberg, S. D., Sept. 26, 1879. Prepared at Battle Creek College Preparatory, Union Col-

lege, University of Nebraska (S.B. 1908). Previous medical education, American Medical Mission College, University of Utah. Entered Rush September, 1909. Chaplain. Married. Seventh Day Adventist.

Robert Orlando Ritter, Orleans, Ind. Born in Orange County, Indiana, Oct. 19, 1884. Prepared at Orleans High School, University of Indiana (A.B. 1908). Previous medical education, Indiana University Medical School. Entered Rush October, 1908. Fraternities, Phi Gamma Delta, Phi Beta Pi. Internship Children's Memorial Hospital, March-September, 1910. M. E.

James Thomas Rooks, Kalamazoo, Mich. Born at Gates, N. C., Sept. 11, 1877. Prepared at academic department Virginia Union University, Richmond University, Kalamazoo College (A.B. 1906). Entered Rush 1906. Internship Passavant Hospital.

Emile Rose. Born in Austria, April 9, 1882. Prepared at University of Colorado (A.B.). Previous medical education, University of Illinois and University of Chicago. Entered Rush 1907. Internship Vienna.

John Gaston Ryan, Taintor, Iowa. Born at Peoria, Iowa, 1883. Prepared at Penn College Academy, Penn College (S.B. 1907), University of Chicago (S.B. 1907, S.M. 1908). Scholarship in physiology, University of Chicago, 1907-8. Entered Rush 1906. Special work, University of Chicago, research in physiology; Rush, research in pathology. Fraternities, Alpha Kappa Kappa, Alpha Omega Alpha. Internship Presbyterian, July, 1910. Has written numerous theses. M.

George Banker Schwachtgen, Oak Park, Ill. Born at Chicago, March 14, 1884. Prepared at Park High School, Kaukauna, Wis., Lewis Institute, University of Chicago (junior scholarship). Entered Rush September, 1906. Fraternity, Phi Beta Pi. Internship St. Luke's Hospital, June, 1910. Married. M.

Raymond Alvah Seiler, Clinton, Iowa. Born at Storm Lake, Iowa, 1884. Prepared at Clinton High School and University of Chicago. Entered Rush September, 1906. Fraternity, Nu Sigma Nu. Internship Illinois Eye and Ear Infirmary, April, 1910.

Emanuel Zachary Shapiro, Eveleth, Minn. Born at Saunivetz, Russia, May 28, 1885. Prepared at Eveleth High School and University of Chicago (B.S. 1908). Entered Rush October, 1906. Internship Cook County Hospital, June, 1910. J.

Alfred Marion Shaw, Macon, Ohio. Born at Macon, Ohio, 1872. Prepared at Ohio Normal University and Ohio Northern University (S.B. 1901). Entered Rush July, 1906. Internship Kansas City General Hospital, July, 1910.

James Hubert Skiles, Chicago. Born at Chicago, Jan. 29, 1885. Prepared at Chicago High School, Lewis Institute (A.B. 1907). Previous medical education, University of Michigan. Entered Rush October, 1908. Fraternity, Nu Sigma Nu. Internship Cook County Hospital, 1910. P.

Clifford Eben Smith, Villisca, Iowa. Born near Elgin, Neb., May 30, 1884. Prepared at Villisca High School, Bellevue College (scholarship), Omaha (B.S. 1906). Previous medical education, College of Medicine Iowa State University. Entered Rush October, 1908. Internship Cook County Hospital, December, 1910. P.

Arthur Cecil Spurgin, Oskaloosa, Iowa. Born in Hardin County, Iowa, June 12, 1886. Prepared at Eldora High School, Penn College (S.B. 1907). Entered Rush September, 1906. Fraternity, Phi Beta Pi. Friends' Church.

Oswald George Stark, Davenport, Iowa. Born at Davenport, Iowa, Oct. 4, 1884. Prepared at Davenport High School, University of Chicago (S.B. 1908). Entered Rush October, 1906. E.

George Heath Steele, Indianapolis, Ind. Born at Greenfield, Ind., April 16, 1884. Prepared at manual training high school and Indiana University (A.B. 1908). Previous medical education, University of Indiana. Entered

Rush, 1908. Fraternity, Nu Sigma Nu. Internship Presbyterian Hospital, January, 1910. E.

Hirrel Harriet Stevens, St. Louis, Mo. Born at Vacaville, Cal., May 14, 1883. Prepared at Carthage (Mo.) High School and Washington University, St. Louis (A.B. 1906). Previous medical education, Washington University. Entered Rush October, 1909. Fraternity, Kappa Alpha Theta, Alpha Epsilon Iota. Internship Cook County Hospital, June, 1910.

J. Guy Strohm, Fairbury, Neb. Born at Endicott, Neb., 1885. Prepared at Fairbury High School and University of Nebraska. Previous medical education, University of Nebraska. Entered Rush September, 1908. Internship Cook County Hospital, December, 1910.

Charles H. Swift, Chicago. Born in Henry County, Kentucky, Aug. 17, 1881. Prepared at Louisville Male High School, University of Chicago (A.B. 1903, S.B. 1905). Entrance scholarship and graduate scholarship in botany. Entered Rush 1906. Fraternity, Alpha Omega Alpha. Vice-president class. Internship St. Luke's Hospital, October, 1910. B.

Eugene Solomon Talbot, Jr., Chicago. Born at Chicago, Aug. 6, 1884. Prepared at Chicago Latin School and Harvard University (A.B. 1906). Entered Rush October, 1904. Fraternity, Nu Sigma Nu. Internship Cook County Hospital, June, 1910.

Alvin Charles Tanner, Birch River, Mich. Born at Sumpter, Mich., June 22, 1875. Prepared at Fenton Normal School, University of Michigan and University of Chicago (A.B. 1906). Previous medical education, University of Michigan. Entered Rush 1904. Internship Home for Feeble Minded and Colony of Epileptics, Faribault, Minn. Traveled in Porto Rico, Cuba, Sandwich Islands, Philippines, Japan and Canada.

Alfonzo Z. Tanner, Salt Lake City, Utah. Born at Clover, Utah, Nov. 30, 1882. Prepared at L. D. S. H., University of Utah (A.B. 1908). Previous medical education, University of Utah (assistant in histology and embryology). Entered Rush June, 1908. Internship L. D. S. Hospital, Salt Lake City, October, 1910. Married. Latter Day Saints.

David Duke Todd, Ida Grove, Iowa. Born at Ida Grove, Iowa, July 14, 1883. Prepared at Coe College (scholarship), University of Iowa (S.B. 1905, scholarship), University of Chicago (S.M. 1908, fellowship). Entered Rush January, 1906. Special work, research bacteriology and pathology. Fraternities, Gamma Alpha, Phi Beta Pi, Sigma Chi, Alpha Omega Alpha. Internship Cook County Hospital June, 1910. Has written numerous theses. P.

John Lear Treacy, Helena, Mont. Born at Monticello, Ind., July 30, 1884. Prepared at Helena High School, Cornell University, University of Chicago. Entered Rush October, 1906. Class president. Fraternities, Sigma Nu, Theta Nu Epsilon, Nu Sigma Nu. Internship Presbyterian Hospital, April, 1910; Cook County Hospital, December, 1910.

Granville Howard Twining, Des Moines, Iowa. Born at Corning, Iowa, 1876. Prepared at West Des Moines High School, Northwestern University (B.S. 1905, M.S. 1906). Previous medical education, State University of Iowa. Entered Rush October, 1908. Fraternities, Sigma Alpha Epsilon, Sigma Zeta, Phi Rho Sigma. Internship Presbyterian Hospital, June, 1910. Traveled in Philippine expedition, 1898-9. M.E.

Nicholas Bacon Wagner, Manitowoc. Born at Chicago, 1878. Prepared at University of Wisconsin (Ph.B. 1906). Entered Rush 1906. Class prophet. Internship Bridewell, March, 1910. Traveled in Europe.

Sydney Walker, Chicago. Born at Chicago, April 28, 1885. Prepared at Armour Academy, University of Chicago (S.B. 1908). Entered Rush 1906. Special work, physiological chemistry at University of Chicago. Fraternities, Phi Kappa Psi, Phi Rho Sigma, Sigma Chi. Internship Cook County Hospital, December, 1910. Traveled in France and England. E.

Martha Anna Welpton, Denver, Colo. Born in Iowa, Aug. 26, 1879. Prepared at Fairfield High School and University of Denver (B.S. 1906). Entered Rush October, 1908. Internship Denver (Colo.) County Hospital, August, 1910.

Edward Franklin Zoerd, Algoma, Wis. Born at Algoma, Feb. 22, 1882. Prepared at Algoma High School and University of Minnesota (S.B. 1907). Previous medical education, University of Minnesota. Entered Rush October, 1908. Fraternity, Alpha Kappa Kappa. Internship St. Mark's Hospital, Salt Lake City. P.

HOSPITAL APPOINTMENTS

The value of a hospital appointment following the regular medical course cannot be overestimated, and the time is probably not far distant when such an appointment will be made a requisite for graduation.

While an internship in any hospital reflects credit upon a graduate and the college, we cannot help but point with particular pride to the record of Rush in the recent Cook County Hospital examinations. Not overlooking the personal element, and appreciating the hours of special study spent in preparation, Rush is certainly to be congratulated on its ability to prepare students for such successful competition in hospital examinations.

As will be seen by the following lists, out of forty internships in Cook County Hospital, Rush took twenty-three places, or over one-half. It is true first place went to our neighbor, the Physicians and Surgeons, but this is amply compensated for by our large percentage of successful competitors, and the fact that so many of them are up at the head of the list.

COUNTY INTERNES FOR 1910

McNealy.....	P. & S.	Pearman, A. C.....	Rush
McLean, F. C.....	Rush	Henny	N. W.
Todd, D. D.....	Rush	Lancaster	N. W.
Nichols.....	P. & S.	Treacy, J. L.....	Rush
Dillehunt, R. B.....	Rush	Johnson	N. W.
Thompson.....	P. & S.	Walker, Sydney	Rush
Smith.....	P. & S.	Snyder	N. W.
Penman, C. A.....	Rush	Smith, C. E.....	Rush
Stevens, Harriet H.....	Rush	Holmgren	N. W.
Talbot, E. S., Jr.....	Rush	McGarry.....	P. & S.
Shapiro, E. Z.....	Rush	Cornell, E. ..L.....	Rush
Falls, F. H.....	Rush	Fowler, E. B.....	Rush
Abbott, D. P.....	Rush	Shafer.....	P. & S.
Skiles, J. H.....	Rush	Hickman, C. C.....	Rush
Moore, J. B.....	Rush	Stout	P. & S.
Bentzun.....	P. & S.	Sword.....	P. & S.
Clements, M.	Rush	Crabb, G. M.....	Rush
Maynard	N. W.	Strohm, J. G.....	Rush
Charlton, C. F.....	Rush	Jacobs	N. W.
Applebaum	N. W.	McKie, J. F.....	Rush

Out of the next 13 who qualified 6 were Rush, 3 Northwestern and 4 P. and S.

The list of appointments other than for Cook County Hospital is incomplete, and its publication will, therefore, be deferred until the next issue of *THE BULLETIN*.

CLINICS, HOSPITALS, AND SOCIETIES

For the benefit of the members of the Alumni Association visiting Chicago, a list of Rush clinics is herewith appended. In addition thereto is given a list of some of the principal hospitals in the city, as well as the means by which they are reached, and the hours of their public clinics. There is also appended a list of various societies and their meeting places.

THE BULLETIN wishes to be perfectly impartial in this respect, giving not only information which directly concerns Rush Medical College, but any information which may be of interest to visiting Alumni. It will be glad at any time to furnish upon application further information regarding any clinic in Chicago.

CLINICS—RUSH MEDICAL COLLEGE

SUMMER QUARTER

MONDAY.

9:00-11:00—Medicine.....	Assistant Professor Jacque
11:00- 1:00—Surgery.....	Professor Bevan or Assistant
2:00- 4:00—Skin.....	Assistant Professor Anthony
2:00- 4:00—Ear.....	Dr. F. I. Brown
3:00- 4:00—Eye.....	Dr. J. B. Ellis
4:00- 6:00—Genito-urinary.....	Professor Belfield or Dr. Herbst

TUESDAY.

9:00-11:00—Medicine.....	Dr. E. E. Irons
9:00-11:00—Pediatrics.....	Professor Cotton or Professor Dodson
11:00- 1:00—Surgery.....	Professor Bevan or Assistant

WEDNESDAY.

9:00-11:00—Medicine.....	Assistant Professor Bassoe
11:00- 1:00—Gynecology.....	Asst. Prof. Keyes or Asst. Prof. Lynch
2:00- 4:00—Throat and Nose.....	Dr. F. G. Stubbs

THURSDAY.

9:00-11:00—Medicine.....	Assistant Professor Jacque
11:00- 1:00—Surgery.....	Professor Bevan or Assistant
2:00- 4:00—Skin.....	Assistant Professor Anthony

FRIDAY.

9:00-11:00—Medicine.....	Dr. E. E. Irons
9:00-11:00—Pediatrics.....	Professor Cotton or Professor Dodson
11:00- 1:00—Surgery.....	Professor Bevan or Assistant
3:00- 4:00—Eye.....	Dr. J. B. Ellis
4:00- 6:00—Genito-urinary.....	Professor Belfield or Dr. Herbst

SATURDAY.

9:00-11:00—Medicine.....	Assistant Professor Bassoe
11:00- 1:00—Gynecology.....	Asst. Prof. Keyes or Asst. Prof. Lynch
2:00- 4:00—Surgery.....	Professor Graham

HOSPITALS

AUGUSTANA—Lincoln avenue and Cleveland avenue.

Take the Lincoln avenue car to Cleveland avenue. Dr. Ochsner's surgical clinic daily, beginning at 7:45 a. m.

CHICAGO POLICLINIC—174 East Chicago avenue.

Take Northwestern Elevated train to Chicago avenue station; or Wells street car to Chicago avenue, and walk one-half block west. Clinics all day, from 9 a. m. until 6 p. m., in all branches.

COOK COUNTY—Harrison and Honore streets.

Harrison street car direct to entrance. Van Buren street car to Honore, two blocks south. Metropolitan Elevated (Garfield Park) to Ogden avenue. Clinics: See special schedule.

ILLINOIS CHARITABLE EYE AND EAR INFIRMARY—227 West Adams street.

Take Harrison (via Center) street car to Peoria street; or Madison street car to Peoria street and walk two blocks south. Clinics daily, from 1:30 to 3 p. m.

MERCY HOSPITAL—Calumet avenue and Twenty-sixth street.

Take Indiana avenue car to Twenty-sixth street, walk two blocks east; or Cottage Grove avenue car to Twenty-sixth street, walk two blocks west. Clinics: Wednesday and Saturday at 9 a. m., Surgery; Monday and Thursday at 8 a. m., Surgery; Tuesday and Thursday, from 10 a. m. to 12 m., Medicine.

MICHAEL REESE—Twenty-ninth street and Groveland avenue.

Take Cottage Grove avenue car to Twenty-ninth street and walk one block east. No special clinics, but hospital always open to doctors.

POST-GRADUATE SCHOOL—2400 Dearborn street.

Take State street car to Twenty-fourth street, walk one block west; or South Side Elevated to Twenty-second street, walk one block west and two south. Clinics all day, from 8:30 a. m. to 5:30 p. m., in all branches.

PRESBYTERIAN—Corner Congress and Wood streets.

Take Harrison street car to Wood street; or Van Buren street car to Wood street and walk one block south. Clinics: See Rush.

ST. LUKE'S—1439 Michigan avenue.

Take any car on Wabash avenue to Fourteenth street, walk one block east and one-half block south. Clinics: Wednesday, 9 a. m. to 12 m., Gynecology; Thursday, 8 to 10 a. m., Surgery; Thursday, 2 to 5 p. m., Eye and Ear. Clinics variable.

WESLEY—2440 Dearborn street.

Take State street car to Twenty-fifth street and walk one block west. Clinics: Tuesday, 8 a. m., Gynecology; Tuesday, 4 p. m., Surgery; Wednesday, 8 a. m., Medicine; Thursday, 4 p. m., Surgery; Friday, 10 a. m., Nose and Throat; Saturday, 9 a. m., Surgery.

SOCIETIES

Time and place of meeting of the Chicago Medical Society, its Branches and Affiliated Societies. Copied from *The Bulletin of the Chicago Medical Society*.

CHICAGO MEDICAL SOCIETY.—Northwestern University Building, Lake and Dearborn streets; every Wednesday evening at 8:30 o'clock (except July, August and September).

1. North Side Branch.—Red Star Inn, 1538 N. Clark street; 8:30 p. m., second Friday of month. Telephone North, 3942.

2. North Shore Branch.—Bismarck Garden, N. Halsted and Grace streets; 8:30 p. m., first Tuesday of month. Telephone L. V. 633.

3. Evanston Branch.—Avenue House; 8:30 p. m., fourth Thursday of month. Telephone Evanston 1110.

4. Northwest Branch.—Northwestern University Settlement, Augusta and Noble streets; 9 p. m., first Friday of month. Telephone Monroe 1717.

5. West Side Branch.—Cook County Hospital; 8:30 p. m., second Monday of month. Telephone West 171.

6. Aux Plaines Branch.—Alternating between Oak Park Hospital and Maywood Hospital; 8:30 p. m., fourth Friday of month. Telephones O. P. 600 and Maywood 5.

7. Douglas Park Branch.—Gads Hill Center, Twentieth and Robey streets; 8:30 p. m., first Tuesday of month. Telephone Canal 963.

8. Stock Yards Branch.—Peoples Bank Building, Forty-seventh street and Ashland avenue; 9 p. m., first and third Thursdays of month. Telephone Yards 1575.

9. Englewood Branch.—Englewood Hospital, Sixtieth and Green streets; 9 a. m., first Tuesday of month. Telephone Wentworth 342.

10. South Side Branch.—Drexel Hall, Fortieth street and Cottage Grove avenue; 8:15 p. m., October 30, November 30, December 30, January 31, February —, March 29, April 30, May 31, June 30. Telephone Douglas 1609.

11. South Chicago Branch.—9154 Commercial avenue; 8:30 p. m., third Tuesday of month. Telephone S. C. 1077.

12. Northwest Suburban Branch.—Alternating between offices of Dr. Ferguson, Irving Park, and Dr. Earle, Des Plaines; 4 p. m., second Monday of month. Telephones Irving Park 35 and Des Plaines 1.

13. Chicago Heights Branch.—93 Illinois street; 8:30 p. m., first Tuesday of month. Telephone C. H. 2124.

14. Calumet Branch.—11245 Michigan avenue; 8:30 p. m., second Thursday of month. Telephone W. P. 43.

CHICAGO GYNECOLOGICAL SOCIETY.—Northwestern University Building; 8 p. m., third Friday of month.

CHICAGO DERMATOLOGICAL SOCIETY.—Meeting place variable; 3:30 p. m., third Friday of month.

CHICAGO UROLOGICAL SOCIETY.—800 Schiller Building; 8 p. m., last Thursday of month. Telephone Central 1779.

CHICAGO LARYNGOLOGICAL AND OTOLOGICAL SOCIETY.—Great Northern Hotel, Parlor L 38; 8 p. m., second Tuesday of month. Telephone Harrison 7904.

CHICAGO MEDICOLEGAL SOCIETY.—Meetings subject to call of Executive Committee.

CHICAGO NEUROLOGICAL SOCIETY.—Bismarck, 180 East Randolph street; 8 p. m., fourth Thursday of month. Telephone Franklin 522.

CHICAGO OPHTHALMOLOGICAL SOCIETY.—Meeting place variable; 8 p. m., third Monday of month.

CHICAGO PATHOLOGICAL SOCIETY.—Northwestern University Building; 8 p. m., second Monday of month. Telephone Central 4486.

CHICAGO PEDIATRIC SOCIETY.—Meeting place variable; 8 p. m., third Tuesday of month. Telephone Harrison 7904.

CHICAGO ORTHOPEDIC SOCIETY.—Meeting place variable; 8 p. m., second Thursday of month.

CHICAGO SURGICAL SOCIETY.—Northwestern University Building; 8 p. m., first Friday of month.

ALUMNI NOTES

Dr. G. A. Norton, '84, has opened a sanitarium at Aurora, Ill.

The Class of 1900 is arranging for a banquet and class reunion on the night of June 13, 1910. This is the tenth anniversary of the class. A special notice, with particulars, will be mailed to each member, direct.

Dr. Bernard J. O'Neill, of the class of 1908, is now located at San Diego, Cal., in association with Dr. Perry Lewis and Dr. H. P. Newman, formerly Professor of Gynecology at the Physicians & Surgeons College, Chicago.

M. B. Stokes, '09, having finished a year's training at the City Hospital, Akron, Ohio, has located at Houston, Texas. Dr. Stokes was married April 16, 1910, and is, therefore, in order for congratulations, which THE BULLETIN extends.

Among the older alumni sending in their dues are the following:

Dr. P. Y. McCoy, '63.....	Evansville, Ind.
Dr. Henry F. Godfrey, '65.....	Galena, Ill.
Dr. Wm. L. Rabe, '66.....	Dwight, Ill.
Dr. Garrett Newkirk, '68.....	Pasadena, Cal.
Dr. F. M. Elliott, '69.....	Aurora, Ill.
Dr. Geo. W. Lasher, '72.....	Los Angeles, Cal.
Dr. O. H. Martin, '74.....	Kewaunee, Wis.
Dr. Wells Andrews, '76.....	Chicago
Dr. Robert Cottington, '77.....	Bloomer, Wis.

RUSH ALUMNI REUNION AT THE A. M. A. SESSIONS AT ST. LOUIS

Every one has been duly informed regarding the next meeting of the A. M. A. at St. Louis, June 7-10, but it may not have occurred to many that this is an excellent opportunity for a general reunion of the former students of old Rush. To be sure we are to have the regular Annual Alumni Meeting in Chicago a few days later, but many who are present at the St. Louis meetings may not be able to come to Chicago, and this will afford a double opportunity for the alumni to meet their friends and classmates. Such reunions in the past have provided some of the most pleasant and entertaining moments in the brief time devoted to attending the A. M. A. meetings. There is nothing so stimulating as the coming together of a

crowd of old classmates, with rousing songs, good stories and reminiscences.

Dr. A. L. Craig, Chairman of the Alumni Reunions Committee, has started the ball rolling for the purpose of having a rousing Alumni reunion at St. Louis on the night of June 7, 1910. A letter, given herewith, while addressed to the members of the Alumni Reunions Committee in particular, might well stimulate the desire in the hearts of other alumni to get up individual class reunions during the period of June 7-10. If not during this period then during commencement week, which follows very shortly: namely, beginning June 13, 1910. In arranging for reunions during commencement week, it is hoped that there will not occur the mistake which has so often been made of having the class reunions on the same night as the general Alumni Banquet. Quite frequently members have been obliged to absent themselves from the banquet in order to attend an individual class reunion. As is stated elsewhere in *THE BULLETIN*, the banquet will occur on Wednesday evening, June 15, 1910.

The following is the letter:

Dear Doctor:—You doubtless are aware that you are a member of the Alumni Reunion Committee of the Alumni Association of Rush for this year. I am the chairman of this committee. Will you kindly get in touch with as many members of your class as possible, writing them and urging them to attend a reunion of your class at the time of our alumni meeting this year? I hope we may have a large and enthusiastic attendance.

Rush Medical College is one of the great institutions of learning. We should all be proud of our Alma Mater and make good by aiding the movement for higher medical education and preventive medicine, thus contributing directly in the most potential way possible in the promotion of health, happiness and prosperity to the greatest of nations, of which we are a very responsible integral part.

Please report progress to me at your early convenience.

Yours sincerely,

A. L. CRAIG, Chairman,
4174 Lake Ave., Chicago.

The following appeal from Dr. Craig should certainly set you to thinking, and bring about the determination to be present if you have not already decided to do so.

To the Alumni of Old Rush who expect to attend the A. M. A. at St. Louis, Mo., in June, 1910. Greeting:

In union there is strength. No quality is more to be desired, no quality is more to be admired than loyalty. Loyalty and earnest and capable cooperation will always secure results.

Every Alumnus of Old Rush should have special pride in his Alma Mater. Rush College is recognized as one of the leading institutions of medical learning in this country and some of its teachers have taken first rank with the foremost medical men of the world. We should use our united influence to advance its interests and in so doing we will aid materially in conserving the best interests of our people. We should lose no opportunity for renewing our acquaintances, cementing our friendships and for con-

ferring over methods and means for the furtherance of the cause of preventive medicine and the eradication of all parasitic diseases. The evening set aside for Alumni entertainments is Tuesday, June 7. Will all those of you who expect to attend the sessions of the A. M. A. at this time kindly let me know at your earliest convenience if they will attend this reunion, that the necessary arrangements may be made.

Yours sincerely,

A. L. CRAIG,
4174 Lake Ave., Chicago,
Chairman Alumni Reunions Committee.

CLASS OF '90, RUSH MEDICAL COLLEGE

Commencement Exercises, Friday, March 25, 1890, at Central Music Hall.

CLASS OFFICERS—President, J. Jones; vice-president, P. H. Manion; valedictorian, E. McLaughlin; secretary, C. W. Carr; treasurer, E. Friend.

EXECUTIVE COMMITTEE—W. J. Bradley, H. G. Anderson, J. E. Brock, C. J. Phillips.

TWENTIETH ANNIVERSARY REUNION.

REUNION SUGGESTION.

Dr. A. M. Corwin and Dr. J. C. Gill, who have officed together since graduation, happened to kick each other awake simultaneously on the subject of reunion, and the first thing they heard was the borborygmal rumbling of the empty stomachs of Rush '90. A letter was sent out to the class, November 15, calling for an expression of opinion as to a desire for a twentieth year reunion. About eighty-five replies enthusiastically recommending were received by enclosed return postal card. December 4 the Chicago contingent was called together at the Great Northern Hotel to talk over the situation and outline a plan. Fourteen out of the twenty-seven attended—Anderson, Brown, Corwin, Croker, Eisenstadt, Friend, Gill, Haley, Jacobs, Phillips, Ruthenberg, Swank, Sippy and Wick. The following unanimous action was taken: Chicago members to contribute \$15 each, to include ticket to banquet; all outside of Chicago, \$5. March 25 being Good Friday, the date of reunion was changed to Monday, March 28. Dr. Corwin was appointed toastmaster and general chairman of arrangements for the banquet and program; Dr. Gill, secretary and treasurer; Dr. Sippy, committee on clinics; Dr. Eisenstadt, organization committee. A second letter was sent out to the entire class December 13 reporting plans. March 3 a neat folder with a beautiful engraving of "Old Rush" on the cover announcing the program for the day and the program of the banquet. A return card recording remittance for the banquet and a brief letter of information regarding the location of the hotel, price of rooms, etc., accompanied the same. The weather was beautiful, sunshiny and mild. The class arrived in the city Sunday night and put up at the La Salle Hotel. The following was the program for the day:

MONDAY, MARCH 28, 1910.

- 8:30 a. m.—The Chicago boys met the class and greetings were exchanged.
- 9:45 a. m.—The entire class left by the Metropolitan Elevated Road for Rush College, and at 10:30 a. m. were well rewarded by a splendid clinic by Dr. Sippy, who exhibited stomach cases and up-to-date apparatus for overcoming stricture of esophagus, and method of diagnosis and handling of stomach cases.
- 11:30 a. m.—A fine surgical clinic by Dr. Bevan.
- 12:30 p. m.—The Presbyterian Hospital served a luncheon to the class, which was highly appreciated by all, and a vote of thanks was rendered.

- 1 p. m.—The class inspected the Senn Memorial Building and the library.
- 2 p. m.—A superb clinic by Dr. Hyde, illustrated with lantern-slides.
- 3 p. m.—Dr. Gill gave a neurological clinic, followed by demonstration of the Wassermann Noguchi test.
- 4:30 to 6 p. m.—Class business meeting; election of officers for the next five-year period. The following officers were elected: President, F. T. Wilcox, La Porte, Ind.; first vice-president, W. J. Bradley, Cedar Rapids, Iowa; second vice-president, H. G. Anderson, Chicago; secretary and treasurer, Emanuel Friend, Chicago; necrologist, T. H. Culhane, Rockford, Ill. Executive committee—L. E. Youmans, E. A. Taylor, A. M. Corwin, E. B. Ruthenberg, J. C. Foley, B. W. Sippy, C. D. McCoy, R. E. N. Heysett, W. G. Hanning, J. A. Patton, C. T. Cooke, W. J. Bradley, W. J. Fernald.

It was moved and seconded that the date of the next meeting be held one or two days before the annual alumni banquet five years hence.

The program of the evening certainly did credit to the organization committee, and to say that the class in general appreciated the labor involved to bring the same to such a successful termination would indeed be putting it mildly. Especial thanks certainly were due Drs. Corwin and Gill, and duly accorded them for their untiring efforts. Beginning with the most sumptuous repast which, judging from the feeling of good-fellowship prevailing, certainly must have satiated the inner man of every one present, the following program, with Dr. A. M. Corwin as toastmaster, was most thoroughly enjoyed; and, although his quotation from Bacon, "Let him be sure to leave other men their turn to speak," was the watchword, we are sure it was the consensus of opinion that had any one of the speakers not adhered to this quotation, the class would not have been disappointed, so thoroughly did they enjoy each and every speaker. Dr. Corwin's wit and apropos remarks as toastmaster would have done credit to a Chauncey Depew.

Dr. Bevan's remarks were, as usual, on his pet subject, "Medical Education," and were thoroughly enjoyed, as we all know how near and dear this theme is to his heart, and, had he not already gained a great name in surgery, his championship of higher medical education would in itself have placed him in the Medical Hall of Fame.

Dr. Youman's speech was, you can well perceive, very nicely received, as well as that of Dr. F. T. Wilcox, while the Phagocytic Rhymes of Dr. Frank Jay brought down the house, as his verses always do. We greatly regret that this poet's well-known modesty precludes their publication; but take it from the class, he ranks with the celebrities and there are only a few of them left.

Dr. Ingals' remarks were very apropos and to the point, and the way they were received showed the affection existing between the class and E. Fletcher.

Regarding the wonders of modern surgery, or, in other words, a compound, comminuted surgical clinic, words can hardly express what delight and mirth this vaudeville stunt created, and again shows the wonderful powers of imagination and organization of Dr. Corwin, or rather disorganization, of a patient who was brought in on a stretcher by two burly policeman, suffering ever since Dr. Bevan performed a laparotomy on his artificial abdomen, which was immensely distended, accounting for his moans and cries. The interne in attendance, making love to a seven-foot nurse with a double cross and golden hair hanging down her back, is interrupted by the red-haired professor, who proceeds to read the riot act to him. What was removed from that abdomen was a marvel and indescribable, only to be appreciated when seen.

Dr. Youman's remarks were as follows: The Class of '90 was present at Rush during a transition period of her history, when the faculty was undergoing many changes. The college was preparing to turn its face from the

old haphazard methods of instruction to those of the modern scientific school. In that day the stock of our Alma Mater paid its holders, the faculty, handsome dividends. To-day the up-to-date medical school, with its many laboratory facilities and practical bedside courses, must surely run into bankruptcy without generous endowment. The two-year course terminated with our class; the three-year course had been added, but was not compulsory. The didactic habit of "teaching" from the arena, lecturing to students half asleep on the perch or sweating over note-books, which later refused to yield more than a smattering of the subject, was in the main what had been in vogue in medical colleges for half a century. The younger and more progressive of the faculty were endeavoring to introduce the laboratory, but how inadequate and primitive were the results, compared with those given to the Class of 1910. The predominance of aged men in the faculty militated against rapid or radical reforms. They were, however, men of strong mentality and dominant character who impressed their personalities upon the life of the Middle West, but they yielded but slowly in their advancing age to the demands of modern medicine and the allied sciences. Those were the best of their age, and left upon us the stamp of their leadership. We cannot forget if we would their sage advice—their wholesome influence in example and precept. We have a sense of pride in the advanced stand which "Old Rush" has taken in higher medical education, and value the fact that we are the alumni of an institution whose degree to-day stands for the best there is as opposed to that process of cramming which enabled us to carry home twenty years ago a yellow sheep-skin duly embellished. Then, too, the class is justly proud of the representation which it has upon the faculty, as well as of those who have gained distinction as teachers in other institutions. Let the good work go on; we'll back it to a finish!

Dr. Franklin T. Wilcox made the following remarks: It seems to be the custom to analyze your subject, but mine explains itself, a hypodermic—morphin, of course—hitting the pipe, result a pipe dream, a Rip Van Winkle sleep of twenty years, since we left Rush, and in that sleep what dreams have come! Appendicitis—you will remember that we never saw an operation for appendicitis in the clinic of Charles T. Parkes; antitoxins, tuberculin and all serum therapy, Christian science and osteopathy, the Emmanuel movement, a sure method of curing consumption, opsonic index, predetermination and control of sex in the unborn, and living forever on a diet of buttermilk; a steady procession, a moving-picture show of lovely dreams passing in the twenty sections through our somnolent intellects. And waking, what do we find? Is the death-rate greatly lowered? is that which we once knew still true? well, when a soap bubble bursts it leaves a wet spot and that wet spot is real, not imagination, and enough wet spots will make an ocean? Physicians have dreamed dreams since the time of Hippocrates, and before that for all I know. Millions of bubbles have burst and left their wet spot until sometimes I really believe the practice of medicine is getting a little sloppy. Twenty years have left their trail. In the stream of humanity we are hustled along seeming to ourselves only the same boys that we were when we began, until some incident occurs which brings us to a realizing sense of the situation. When, back in a past century, I went to seek a livelihood in an Indiana town, since made famous by our distinguished citizen, Mrs. Gunness, a Chicago importation, by the way, I secured an office and waited. One day a man presented himself and said: "My wife has been sick for a long time and old Dakin isn't doing her any good, so I told the folks to-day that I was going to get young Dr. Wilcox; he is just out of school and knows something." (That was twenty years ago.) About a month ago a man presented himself at my office and said: "My wife has been sick for a long time. I have had young Dr. Simons and he isn't doing her any good, so I told the folks to-day that I was going to get old Doc. Wilcox, he's had experience,

anyway." I went to see the case, but somewhat soberly. The vandal years have robbed us. Our high hopes of fame and wealth they have taken from us; our air castles they have tumbled about our ears, but the compensations they have given are better by far than the realization of our adolescent hopes could possibly have been. Half way through our professional life we are to-day in the full enjoyment of our best powers. Instead of the mingled conceit and timidity of the embryonic M.D., we have reached a better understanding of our ability, and can approach our work with the confidence born of experience, coupled with a very intense perception of our limitations. 'Tt seems to me, too, that now, as our families grow up around us, that the practice of medicine takes on a more human aspect. Our old patients are no longer to us so many cases. The expectant mother is no longer merely an obstetrical case, but a woman whose mission is about to begin and to us it is given, under Providence, to do our important part in the plan of Nature. For we have now become a part, an intimate and important part, in Nature's machine. We have been accepted, not discarded. Our deep love for humanity, which comes of service rendered, the deep love of humanity for us, is the sweetest compensation that the vandal years could give us. They have robbed us, but we in turn have robbed them. And as we meet to-night it is fitting that we should rejoice, for now we can. When we meet again Rush '90 will be smaller and those who come will be fewer and older. But now in the prime of life, fighting the battles of our fellow-men, in the full glory and strength of our manhood, doing our small part to bring on that day when disease and consequent crime and suffering shall be unknown, we have no time, nor cause, for sadness.

The twenty years since last we met,
Seem to me twenty folios bound and set
By Time, the great transcriber, on his shelves,
Wherein are written the histories of ourselves.

May the histories of the next twenty years of this class be as pleasant and as profitable as those which are passed.

Other interesting and highly enjoyable features of the evening were by the class Quartette, the "Russell Sisters" and the soloist, Gustave Holmquist, who were superb.

It was our pleasure to have Dr. C. J. Whalen of the Class of 1891 present to give the succeeding class any desirable pointers for their reunion.

The original class had a membership of 161. Of these, 41 are either dead or not so listed in our National Directory as to be accessible. Of the 120 now located, 27 are in Chicago, 93 outside.

At our reunion, 52 of the class were present, as follows:

Illinois, outside of Chicago.....	13	
Illinois, in Chicago.....	19	
	<hr/>	32
Iowa		5
Wisconsin		5
Indiana		4
Kansas		2
Ohio		1
Michigan		1
New Jersey		1
Washington		1

Forty-three per cent. of the 120 of the whole class accessible. In other words, 33 from outside Chicago, 19 from inside. This is the record so far. Hope '91 will surpass it. Those present were:

H. G. Anderson, Chicago.	Richard Haley, Chicago.
W. E. Brenneman, Chicago.	Frank Jay, Chicago.
F. I. Brown, Chicago.	J. Jacobs, Chicago.
Chas. H. Beadles, Illinois.	C. D. McCoy, Ohio.
J. E. Brock, Illinois.	J. B. Maxwell, Indiana.
W. J. Bradley, Iowa.	H. L. Moffatt, Wisconsin.
Clinton F. Cooke, Washington.	P. H. Manion, Iowa.
T. H. Culhane, Illinois.	W. W. Overfield, Illinois.
J. W. Connelly, Illinois.	W. S. Orth, Chicago.
C. W. Carr, Illinois.	J. A. Patten, New Jersey.
A. M. Corwin, Chicago.	G. W. Pirtle, Indiana.
Jas. N. Crocker, Chicago.	D. P. Russell, Chicago.
J. A. Dales, Iowa.	E. B. Ruthenberg, Chicago.
Chas. B. Dearborn, Illinois.	D. W. Stephenson, Indiana.
Geo. A. Dicus, Illinois.	C. M. Smith, Wisconsin.
S. Eisenstadt, Chicago.	C. W. Swank, Chicago.
W. J. Fernald, Indiana.	B. W. Sippy, Chicago.
J. C. Foley, Illinois.	Edward A. Taylor, Wisconsin.
E. Friend, Chicago.	W. Wick, Chicago.
Harry Ferguson, Illinois.	A. O. Wright, Illinois.
E. F. Gavin, Illinois.	F. W. Walker, Wisconsin.
C. W. Gillin, Iowa.	F. T. Wilcox, Indiana.
J. C. Gill, Chicago.	D. D. Wilson, Kansas.
J. J. Hassett, Illinois.	N. N. E. Wood, Chicago.
E. N. Heysett, Michigan.	L. E. Youmans, Wisconsin.
W. G. Hanning, Kansas.	S. G. West, Chicago.

Those who have died since graduation are as follows:

Frank P. Buffum.	James Sorensen.
E. T. Cody.	Ira G. Stone.
Wm. Comerford.	Anthony White.
John K. Dick.	Joseph L. Wisteim.
Wm. Dudley.	Frank D. Stannard.
A. C. Godfrey.	C. W. Intosh.
W. D. Kniseley.	C. F. Groelle.
W. N. Lowrie.	Wm. G. Grasser.
Z. W. Monroe.	James C. Beckwith.
Henry T. Murphy.	L. G. Borst.
Chas. Osborn.	Joseph G. Wolfe.

If any Rush Alumnus or member of '90, upon reading this list, can send information concerning any member of it, kindly communicate with Dr. Emanuel Friend, 70 State Street, Chicago, Secretary, Class of 1890.

BIOGRAPHICAL SKETCHES.—CLASS OF 1890

Anderson, H. G., 24 West Sixty-seventh Street, Chicago. Aged 50. Married; three children. Located at 24 West Sixty-seventh Street. Has been doing general work at the above number since graduation.

Brenneman, William Elmer, 750 East Forty-third Street, Chicago. Aged 46. Married; one child. Located at Golden, Columbus, Bloomington and Quincy, Ill., from 1890 to 1895. Has been doing general work in Chicago since 1895. Assistant Neurologist, Northwestern University.

Brown, F. I., 3833 North Forty-second Avenue, Chicago. Aged 41. Married; two children. Has been located in Chicago since graduation. Instructor otology, Rush Medical College. Did some post-graduate work in Vienna in 1903 and in Breslau and Vienna in 1905. Specialty, Diseases of the Ear, Nose and Throat.

Bradley, William John, Cedar Rapids, Iowa. Aged 43. Married; one child. Located for a time at Coal City, Ill., subsequently at Cedar Rapids, Iowa. Is a member of staff St. Luke's Hospital, Cedar Rapids. Lectures to nurses. Did post-graduate work in Chicago, 1899; New York, 1890; Berlin, 1891. Specialty, Abdominal and Gynecological Surgery.

Boone, Malcolm Benton, Mount Victory, Ohio. Aged 43. Married; four children. Has been located in different parts of the United States and Canada.

Ballard, Charles N., Oklahoma City, Okla. Aged 56. Married; two children. Located in Chicago for 16 years; Oklahoma City, 2 years. Was Associate Professor of Gynecology and Clinical Gynecology at College of Physicians and Surgeons (Medical Department of the University of Illinois); Surgeon to Marion Sims' Sanitarium, Chicago; Attending Surgeon at West Side Hospital and Attending Gynecologist at the West Side Free Dispensary, Chicago. Specialty, Surgery and Gynecology.

Brock, John Edgar, Coal City, Ill. Aged 49. Married; two children. Has been located in Coal City since graduation. Did post-graduate work in Chicago in 1901 and 1910.

Beadles, Charles H., Oglesby, Ill. Aged 43. Married; two children. Has been located in Lewistown and Oglesby since graduation. Attends St. Mary's Hospital, La Salle, Ill.

Corwin, A. M., 34 Washington Street, Chicago. Aged 46. Married; two children. Has been located in Chicago since graduation. Illinois Post-Graduate School, Professor Laryngology and Otology. Professor Physical Diagnosis, Physicians and Surgeons College. Did post-graduate work in Berlin, 1890. For ten years Demonstrator Physical Diagnosis, Rush Medical College. Specialty, Diseases of Nose, Throat and Chest.

Collins, Clinton D., 92 State Street, Chicago. Aged 42. Not married. Has been located in Chicago since graduation. Teaching Skin and Venereal Diseases at Hahnemann Medical College. Did post-graduate work in New York and Vienna. Spent one year, 1900, in Vienna and London in post-graduate work. Specialty, Skin and Venereal Diseases.

Crocker, James Norman, 1 East Twenty-second Street, Chicago. Aged 46. Widower. Has been located in Chicago since graduation. Attends Provident and People's Hospitals. Specialty, General Practice.

Carson, Andros, Des Moines, Iowa. Aged 47. Married; three children. Has been located at Elliott, Iowa, for 15 years and Des Moines the past 5 years. Spent one summer in New York doing post-graduate work. Specialty, General Practice.

Carr, Charles Wesley, Denison, Iowa. Aged 44. Married; one son. Located at Dow City, Iowa, for 12 years and Denison for the past 8 years. Surgeon, Denison Hospital.

Culhane, Thomas Henry, Rockford, Ill. Aged 41. Married; three children. Has been located at Rockford since graduation. Consulting Surgeon, Rockford Hospital. Did post-graduate work at West Side Hospital, Chicago. Specialty, Surgery.

Connelly, James Wilson, Farmington, Ill. Aged 48. Married; one child. Has been located at Farmington since graduation.

Dearborn, Charles Bartlett, Mount Sterling, Ill. Aged 42. Married; two children. Has been located at Mount Sterling since graduation. Specialty, General Practice.

Dales, John A., Sioux City, Iowa. Aged 49. Married. Located at Marble Rock, Iowa, for 6 months; Elgin, Ill., a year and a half; Belden, Neb., 3 years; Randolph, Neb., 4 years; Sioux City, Iowa, 11 years. Attending Surgeon to St. Joseph's Hospital, Mercy Hospital, St. Vincent's Hospital, Samaritan Hospital, Sioux City. Former Professor of Surgical Anatomy and Clinical Surgery, Sioux City College of Medicine. Specialty, Surgery.

Brennan, Darius Day, Rathdrum, Idaho. Aged 52. Married. Has been located at New York, Iowa, Corydon and Rathdrum, Iowa, since graduation. Did post-graduate work in 1900. Specialty, Women and Children.

Discus, George Allen, Streator, Ill. Aged 46. Married; six children. Has been located at Streator since graduation. Post-graduate work at University of Berlin, Germany. Secretary and treasurer North Central Illinois Medical Association.

Eisenstadt, Solomon, 42 Madison Street, Chicago. Aged 43. Married; one child. Has been located in Berlin, Dresden, Vienna and Chicago since graduation. Attendant to Michael Reese Hospital and Washington Park Hospital. Teaching, College of Physicians and Surgeons. Did post-graduate work abroad. A member of several social and college organizations.

Edgecomb, Thomas Jefferson, Shasta, Cal. Aged 52. Married; three children. Has been located at Chicago, Ill.; Iron Mountain, Mich.; Shasta, Cal., since graduation. Member of County Medical Society.

Fairchild, Lewis A., Peru, Neb. Aged 62. Married; six children. Has been located at Randall, Kan., 5 years; Almena, Kan., 4 years; Peru, Neb., 11 years, since graduation. Did post-graduate work at University Medical School, Kansas City, Mo., 1893. Special course in Surgery same year with Emory Lanphear.

Friend, Emanuel, 70 State Street, Chicago. Aged 39. Single. Has been located in Chicago since graduation. Instructor in Surgery, Rush Medical College; Attending Surgeon, Michael Reese; Assistant Attending Surgeon, Presbyterian Hospital; Attending Surgeon, West Side Dispensary and Home for Jewish Friendless Working Girls. Consulting Surgeon to the Chicago Winfield Memorial Sanatorium. Member Chicago Medical and Chicago Surgical Society. Did post-graduate work in Heidelberg, Vienna, Berlin and Paris. Specialty, Surgery.

Fernald, William Jenkins, Frankfort, Ind. Aged 45. Married; five children. Has been located at Rantoul, Ill., for ten years and at Frankfort since 1900. Did post-graduate work in Vienna for 6 months, 1900; 5 months in 1905 and several times in Chicago Hospitals. Specialty, General Practice.

Ferguson, A. M., Huntington, Ind. Aged 50. Married; two children. Has been located at Frontier, Mich., and Huntington, Ind.

Fox, Phillip R., Madison, Wis. Aged 42. Married; two children. Has been located at Madison since graduation. Specialty, Surgery.

Foley, John C., Waukegan, Ill. Aged 46. Married; three children. Has done considerable post-graduate work in Chicago, Baltimore and New York. Specialty, Surgery. Connected with Jane McAllister Hospital.

Gillin, Charles Wesley, Sioux City, Iowa. Aged 44. Married; four children. Has been located in Doon, Iowa, 9 years; Waterloo, 1 year; Sioux City, Iowa, 8 years.

Gavin, Edward Ford, Waukegan, Ill. Aged 45. Single. Located in Waukegan since graduation. Spent one year in St. Luke's Hospital, Chicago, and now connected with Jane McAllister Hospital, Waukegan. Specialty, Eye, Ear, Nose and Throat.

Graham, Dales Y., Morning Sun, Iowa. Aged 44. Married; one child. Located at Nortonville, Kan., and Morning Sun, Iowa, since graduation. Specialty, General Practice.

Gill, James Cornelius, Chicago, Ill. Aged 44. Married; two sons. Located in Chicago since graduation. Associate Professor in Medicine, Rush Medical College; Professor Nervous Diseases, Chicago Polyclinic. Post-graduate work in London, 1905. Specialty, Nervous Diseases.

Haley, Richard, 2456 Thirty-eighth Street, Chicago. Aged 48. Married; five children. Has been located in Chicago since graduation.

Haning, William Gutch, Belleville, Kan. Aged 51. Married. Has been located at Belleville since graduation. Was connected with Ainsworth Medical College, 1886. Has been in retail drug business nine years.

Heysett, Robert Edward Nelson, Baldwin, Mich. Aged 41. Married; two children. Has been located at Republic, Ludington and Baldwin, Mich., since graduation. Was connected with Republic Iron Company's Hospital in 1890. Took two courses at Bellevue, N. Y., post-graduate work. Specialty, Women.

Horton, Fred, Newcastle, Wyo. Aged 44. Married; four children. Located in Newcastle, Wyo., since graduation. Did post-graduate work in 1897 at Chicago Post-Graduate School, several months at various Eastern hospitals at different times.

Hall, Harvey E., La Junta, Colo. Aged 46. Married; three children. Spent 13 years in Maitland and located at La Junta since 1904.

Hawley, Alanson W., Seattle, Wash. Aged 44. Married; two children. Has been located at Chicago, Ill.; Kankakee, Ill., and Seattle, since graduation. Formerly connected with Illinois Eastern Hospital for Insane and at present with Wayside Emergency, Seattle. Did post-graduate work in London, Eng. Specialty, E., E., N. and T.

Hassett, James J., McLeansboro, Ill. Aged 47. Married; four children. Has been located at McLeansboro since graduation. Did post-graduate work at Chicago Polyclinic for three terms.

Hill, Green Ewing, Girard, Ill. Aged 47. Married. Located at Modesto, Ill., and Girard, Ill., since graduation. Did post-graduate work at Chicago Polyclinic.

Jacobs, John M., 342 Wellington Avenue, Chicago. Aged 57. Married; eight children. Has been located in Chicago since graduation. Did post-graduate work at Chicago Polyclinic. Specialty, Obstetrics.

Jones, Asa Norman, Reedsburg, Wis. Aged 45. Married; one child. Was located at Hillsboro, Wis., until June, 1909. Connected with Reedsburg Hospital. Did post-graduate work Eye, Ear, Nose and Throat in Chicago.

Loofbourrow, Thaddeus L., Eureka, Cal. Aged 43. Married; five daughters. Has been located in Chicago 4 months; Lebanon, Neb., 4 months; Brock, Neb., 4 years; Eureka, 15 years. Specialty, Surgery.

Liesman, Bismarck, Kellogg, Iowa. Aged 42. Married; four children. Located at Portland, Ore., for one year, and Kellogg, Iowa, since.

Livingston, Hugh, Hopkinton, Iowa. Aged 63. Married; one child. Has been located at Hopkinton since graduation.

Moorehead, Edward Louis, 3517 Jackson Boulevard, Chicago. Aged 46. Married; one son. Surgeon to Cook County Hospital and St. Anthony's Hospital. Professor of Surgery, Loyola University; Professor Gynecology, Illinois Post-Graduate School. Was for several years Clinical Assistant Professor Gynecology, Rush Medical College. President Medical Board Cook County Hospital, 1897-99. Interne Cook County Hospital, 1890-92. Did post-graduate work in Berlin and London. Specialty, Surgery and Gynecology.

McCool, William E., Evansville, Ind. Aged 41. Married; two children. Located at Oakland City four years; Evansville, Ind., fifteen years. Con-

nected with St. Mary's Hospital. Did post-graduate work in Chicago and New York.

Moffatt, Henry L., Poysippi, Wis. Aged 57. Married; one son. Has been located at Poysippi since graduation. Specialty, hard work.

Manion, P. H., Charlotte, Iowa. Aged 46. Single. Has been located at Charlotte since graduation. Did post-graduate work in Berlin, Germany. Specialty, General Practice.

McCoy, Clem D., Kenton, Ohio. Aged 45. Married. Has been located at Columbus and Kenton since graduation. Did post-graduate work in Chicago Polielinic and Illinois Electro.

Maxwell, John B., Mount Carmel, Ill. Aged 50. Married. Has been located at Mount Carmel since graduation.

Orth, William S., 628 Wrightwood Avenue, Chicago. Aged 45. Married; three children. Attending Physician Alexian Brothers' Hospital and German Hospital. Specialty, Internal Medicine.

Phillip, C. J., 301 West Garfield Boulevard, Chicago. Aged 52. Married; four children. Has been located in Chicago since graduation. Attending Physician St. Bernard's Hospital. Did post-graduate work at Northwestern University in Pathology.

Patton, Jacob Allen, Newark, N. J. Aged 43. Married; two children. Located at Charleston, Ill., 1890-1891; Chicago, Ill., 1891-1908; Newark, N. J., since 1908. Assistant Professor in Chemistry, Materia Medica and G. U. Surgery in Rush Medical College, 1893-1908. Did post-graduate work in Vienna, Berlin and Breslau (Genitourinary Clinics). Assistant Medical Director, Prudential Life Insurance Company. Specialty, G. U. and Insurance.

Peck, George William, Sawtelle, Cal. Aged 68. Married; one child. Located in Omaha, Neb., for 10 years and 10 years in California. Specialty, General Practice.

Pirtle, George Wylie, Carlisle, Ind. Aged 41. Married; one child. Located at Carlisle since graduation.

Ruthenberg, E. B., 614 York Place, Chicago. Aged 42. Married. Has been located in Chicago since graduation. Pathologist Passavant Memorial Hospital and Surgeon to North Star Dispensary. Specialty, General.

Russell, Dennis P., 3158 West Van Buren Street, Chicago. Aged 50. Married. Specialty, Gynecology.

Smith, Charles M., Jr., Evansville, Wis. Aged 44. Married; one child. Has been located in Evansville since graduation. Attendant at Evansville Sanatorium. Has done post-graduate work in Chicago and New York. Specialty, Diseases of Women and Surgery.

Sippy, Bertram W., 100 State Street, Chicago. Aged 43. Married; three children. Has been located in Missoula, Mont., and Chicago, Ill., since graduation. Attending Physician Presbyterian and Cook County Hospitals. Professor of Medicine, Rush Medical College. Post-graduate work in Vienna, 1895-96. Specialty, Internal Medicine.

Swank, Clyde W., 5042 Sheridan Road, Chicago. Aged 44. Married; four children. Has been located in Chicago since graduation.

Schultz, F. M., Wauwatosa, Wis. Aged 49. Married; three children. Located in Milwaukee 17 years, 8 years as Commissioner of Health; Wauwatosa, three years. Superintendent Milwaukee County Hospital, three years. Superintendent Milwaukee Hospital Training School for Nurses.

Stevenson, David William, Richmond, Ind. Aged 44. Married; six children. Located 4 years in China, 15 years in Richmond. Attendant at Reid Hospital. Interne Illinois Charitable Eye and Ear Infirmary, doing

post-graduate work; also Philadelphia Polyclinic. Specialty, Eye, Ear, Nose and Throat.

Taylor, Edward A., Racine, Wis. Aged 45. Married. Has been located at Algona and Racine since graduation. Attendant at Northern Hospital for the Insane and State Hospital. Taught at St. Luke's Training School and did post-graduate work in Chicago.

Utley, John D., Spring Valley, Minn. Aged 44. Married; one child. Located at Bessemer, Mich., and Spring Valley since graduation.

Wood, Nathan N. E., 1555 La Salle Avenue, Chicago. Aged 57. Married. Has been located in Chicago since graduation. Attending Surgeon at St. Francis Hospital and Chicago Hospital. Professor of Pathology and Surgery. Resident Surgeon Chicago Medical and Surgical Institute. Specialty, Surgery.

Wick, William John, 103 State Street, Chicago. Aged 42. Married; one child. Has been located at Milwaukee, Wis., and Chicago since graduation. Connected with Chicago Polyclinic. Assistant Professor Proctology, Chicago Polyclinic. Specialty, Rectal Diseases.

Whitmire, William L., Sumner, Iowa. Aged 45. Married; one child. Located at Sumner since graduation. Post-graduate work in New York, 1894.

Wilson, David Dill, Nortonville, Kan. Aged 48. Married. Located at Nortonville, Kan., since graduation. Teaching Orthopedic Surgery at Kansas Medical College. Post-graduate work in Orthopedic Surgery in New York. Specialty, Orthopedic Surgery.

Widener, W. E., Tippecanoe City, Ohio. Aged 42. Married; one daughter. Located at Tippecanoe City since graduation. Specialty, Diseases of Children.

Wooding, Benjamin F., Denver, Colo. Aged 47. Widower; one daughter. Has been located at Trinidad and Denver since graduation. Did post-graduate work in Chicago in 1894. Specialty, Typhoid Fever.

Wright, Arthur Octavius, Waukegan, Ill. Aged 58. Married; one son. Located at Waukegan since graduation.

Wilcox, Franklin Trumbul, La Porte, Ind. Aged 44. Married; two sons. Has been located at La Porte since graduation, excepting 6 months at Minonk, Ill. Did post-graduate work in 1905.

West, Steven G., 103 State Street, Chicago. Aged 45. Married; four children. Located in Chicago since graduation. Connected with West Side Hospital and Frances Willard Hospital. Teaching at the P. and S. College. Post-graduate work at the Illinois Post-Graduate. Specialty, Surgery.

Whalin, Oscar D., 6056 Kimbark Avenue, Chicago. Aged 44. Married; one child. Located in Philadelphia, New York and Chicago since graduation. Did post-graduate work Jefferson College, Philadelphia, 1893-99. Specialty, Life Insurance Work.

Walker, Frederick W., St. Croix Falls, Wis. Aged 50. Married; two children. Located at St. Croix Falls, Wis., since graduation. Interne City Hospital, St. Paul, Minn., one year.

Wells, W. Scott, Providence, R. I. Aged 46. Married; one child. Located in Ohio and Rhode Island (11 years in Rhode Island) since graduation. Did post-graduate work in New York and Boston in Surgery and Opsonic Therapy.

Youmans, Laurel Elmer, Mukwonago, Wis. Aged 46. Married; two children. President Citizens Bank. Post-graduate work at Chicago Clinical School. Specialty, general practice.

A LITTLE HUMOR NOW AND THEN

The following are some interesting letters received by the College from time to time. The impression evidently prevails in some regions that Rush is a diploma mill.

Rush Medical College, Chicago, Ill.

you will pleas send me a copy or so of your Stationary Letter heads of your university unprinted and Terms of college course. Books and suplys to Physicians and Surgeons and also in form me who issues Diplomas.

Thanking you for the above favors and hoping to hear from you by Return mail

I Remain yours Very Truly,

Dr. D. A. _____.

April 4/27/1909.

To the Rush Medereull Colidg, Chicago.

Dar genteler mend in righten askin yor all to som in for mashon of Practer to becom a medereull coast of being a. Doctor of Phyozelg I want to practer to becom full coast. Hygean coast I havin a Comon School in I will try it. I am will in pay yey all \$10⁰⁰ one hunder Dorlas for my coast to gradgerat me and given to me yer all in Cludie Deplomer and Stiffick. And if yer all will Except of it I Will send yer all \$20⁰⁰ Dorlas in few days.

June the 30. 1900.

from to rush Medical College.

Dear sirs i have not got your whole address so i write with what i have. Please what is required to obtain a diploma such as would be required for a specialist on catarrh. Just a diploma for this one thing

if you will send me one i will pay you well for it or send me questions to answer so i may obtain one or tell me how i can get one the quickest and cheapest. please find stamp enclosed for an answer to this address to

Chicago, June 4, 1901.

To the Faculty of Rush Medical College

Messrs. Mr. and are owing me \$9.00 for board and have went away without even saying a word about it. If such men make doctors let us pray.

January 12, 1907.

Rush Medical Clinic, Cook County Horspital, Chicago, Ill.

Dear Sirs: I would love to correspond with you in medical matters, Surgaickal operations. I would love to have a Practical medical Book. let me know whither you can furnish this Book or not

I will be pleased to Except 2 copies of Medical Diploma. I want one of those Diplomas as a sample it printed and headed by the medical authority you need have my name on it. I want it headed by the medical authority. But the Balanc you leave unprinted. I want 2 certificates in the same manner. I want these papers to make Inspections with, whether certain Protenders has ever been at your school or not and if you will pleas send theas papers to me I will in Return for you Do any thing hear in this country that I can to Pleas you. I will work to your advantage in helping to get your works maid known in this part of the Country. & hoping to hear from you soon with the papers that I ask you to send, hoping this will be favorable with you.

I Remain yours Truly,

Dr. A. _____.

Pleas if you have catalogue of Horspital Supplies, Pleas send one.

January 28, 1907.

Pleas I never received the announcement sent me under separet cover. I have 4 medical Books. if you have any medical Book for sail I would love to purchas one.

I Received my name from Birth. Doctor was the name given me. So my name is Doctor by name and also by Practic. I have stuyed medicines 27 years it seems to Be my gift. I am still in serch of mor knowledg.

I write you one of my testamonials sworn to/

I have a receipt that never fails to cure cancer

I have one Dr. Book that was Published at Rush medical clinic cook county Chicago.

Hoping to hear from you again I Remain

Yours truly,

Dr. A. _____.

This testimonial is to testify that in the year of 1883 that Dr. A. Practitioner in medicines Pathology came to me in my suferings twice in the above named year. made 2 trips to see me and left me medicines each time for my Complaint most searious complicated complaint of Liver and Kidney trouble and such troubles as women are subject to which done me considerable good and I am still living and am 73 years old.

Sign

her

x

mark

Subscribed and sworn to Before me R. D. a Justice of the Peace of County. this given under my hand the 23rd day of Jan 1907.

Rush Medical College Gentlemen

I Have found Out, How to Make A Medison, that has curd all sorts of bowl Trouble

It simply works wonders on Man. Pleas do *not* Inquire here of my Med-ison be-caus, I come very near killing my-self with my own Medison. by taking to mutch.

Yours Very Truly,

Head Man., Rush Med. College.

Dear Sir I want to know if you Buy bodies alive I mean while one is living. I am 26 last May. I have Bin a cripple all my life and have Spint a young Fortun on my leg to no good. Now I wish whin I die for some good Med. Colledge to have my body and to be frank I dont thank I have a verry long while to live. I will be surprised if I live till next May. Sir write me and let me know. First place after I am ded I do not want it to still be a Mystery about my leg and arm. And if you buy what or how much do you give for a good Sound body excep Bum left leg and right arm.

6 ft in shoes. Small waist Large cest extry large Large of limbs Right leg large Left leg small verry small Left arm large awful large Right arm small

Yous

Dear Sirs I have just heard of your lightning chicken Powders and am anxious to get some of it.

Will you kindly let me hear from you by return mail giving me prices of different size packages if you put it up in more than one size, and any other information you may care to give.

Yours Respectfully

To the Rush Medical College Chicago Ill

Gentlemen I have been practicing medison for over 20 years and have not got a Deplomia now I would like to know if the collage would grant me a diplomia providing I would go personally to the collage and pass a first class examination I think I can pass a first class examination and I am to old now to comance going to collage but I would be willing to pay a resionable fee if the collage would grant me a diplomia you will please answer by return maile you need not rite a comitting letter but give me to understand what the fees would be and when you would be ready for me I dont want to use the diplomia in the United States I want to use it in but I would ask that if any one should rite you from regarding it to give them to understand that its all right now gentlemen this letter is confidential I trust that if you dont feel like doing business that you will keep this to yourselves. Address

P. S. Would not like to stop there over one or two days if possible as I will be on my way to where I will locate.

EDITORIAL NOTES

Received and referred to the Library of Rush:

Four reprints and 2 volumes from Dr. J. Rudis Jicinsky, '96, Cedar Rapids, Iowa.

Is Radiography in Colors possible?

Is Sterility at Will Possible under the Application
of the Roentgen Rays?

The Skiagraphy of the Future.

Positive Diagnosis of Incipient Tuberculosis Pul-
monalis by Roentgen Rays.

Volumes 1 and 3 of Benj. Rush's works on "Medical
Inquiries and Observations."

SPECIAL LETTER TO THE CLASS OF '69.

The Alumni of '69 are planning to attend commencement day, and take part in the exercises, as this letter will show:

DEAR DOCTOR:—Last year our class of '69, Rush Medical College, held its first reunion in connection with the Alumni Association Meeting and Banquet, at the Auditorium, on which occasion we of 40 years ago, now 41, were the cynosure of all eyes and given a most hearty welcome, while one of our number was elected President of the Association; a compliment quite unexpected but fully appreciated by us all. We had decided to meet again in two years, but, with one of our own class in the chair, I as the recipient of that distinguished honor promised to invite my colleagues to hold a meeting this year and act as a reception committee to greet the visiting Alumni of all the classes and take an active part in the exercises. It is our sincere hope that every living member of the class of '69 can arrange to be present.

You are therefore invited to attend and act as a member of the Reception Committee at the annual meeting and banquet of the

Alumni Association of Rush Medical College, to be held Wednesday, June 15, 1910.

Your early acceptance is requested, and upon its receipt a complete program will be sent to you.

Very truly, yours, **RAYMOND L. LEONARD,**
President, Rush Medical College Alumni Association.
928 La Salle Avenue.

In the present issue appears a report of the Twentieth Reunion of the Class of 1890, which was voted by all those present to have been one of the most successful class reunions in the history of the college. For the success of this event the members of the class are especially indebted to the untiring, painstaking efforts of our worthy alumni, Dr. Arthur M. Corwin and Dr. James C. Gill, who devoted many hours of their valuable time to preparing the program and attending to its proper execution.

THE BULLETIN regrets that lack of space prevents the printing of the introductory speeches of Dr. Corwin at the banquet. These were presented in his inimitable style, and contained such humor and wit as would do credit to the best funny paper published.

THE BULLETIN is still receiving some complaints from members of the Association that the issues do not reach them. This is due, in practically all cases, to the fact that the college has not been informed regarding change of address. In case any change in address is made will you kindly notify Rush Medical College immediately, in order to insure proper delivery of THE BULLETIN. Take the opportunity of attending to this while you are in Chicago for the Annual Alumni Meeting.

The regular Annual Banquet of the Alumni Association will again be held in conjunction with that of the Faculty to the Graduating Class, since the result of this combination last year was such a signal success.

This will be a year of reunions—sort of a continuous performance, as it were. After the good times had at St. Louis, the members of the association can come directly to Chicago, to be present at the Annual Alumni Meeting and Banquet, eat a lot of good food, see a lot of good clinics, see a good play at the theatre, and continue for a few days longer the pleasant and inspiring association with their old classmates. The time has always been too short, heretofore. Just about when we were beginning to get acquainted again, we would have to leave and go back to the old grind for another year. Let everyone come this time! Throw off the yoke, and feel like you did back in your old student days before the strenuous cares of practice were turning your hair gray! You will be sorry if you miss it!



RUSH MEDICAL COLLEGE AND SENN HALL



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The Bulletin

OF THE
ALUMNI ASSOCIATION
OF
RUSH MEDICAL COLLEGE

Vol. VI

JULY, 1910

No. 4



PUBLISHED QUARTERLY
(October, January, April and July)

BY

RUSH MEDICAL COLLEGE

IN AFFILIATION WITH

THE UNIVERSITY OF CHICAGO

BOOST

THE ALUMNI ASSOCIATION OF RUSH MEDICAL COLLEGE

Why can't we have 1,000 Members during the next year?

We can if each alumnus will help get them!

We have about half that number of paid membership out of a possible 4,000.

Surely one quarter of the alumni ought to belong to the Association.

At the suggestion of Dr. Dodson, at the annual meeting, a lot of men agreed to assist in increasing the membership.

If every member would get one other alumnus to send in his dues, it wouldn't take long to accomplish the end in view.

If we have more members we can do more to make the Association worth while; and we can have a Bulletin which will reflect great credit upon both the Association and the College.

It's growing already—won't you do your part as an alumnus of Rush to make it grow more?

The Bulletin

of the

ALUMNI ASSOCIATION OF RUSH MEDICAL COLLEGE.

Volume VI

July, 1910

No. 4

ALFRED N. MURRAY, Editor - - - 100 State Street, CHICAGO, ILL.

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TABLE OF CONTENTS

Original Articles—	PAGE
“The Doctors of the Laws,” Judge Nathaniel C. Sears, Chicago....	3
Response to the Toast, “The Alumni,” Dr. Charles B. Reed, ’87 Chicago	5
Reminiscences of Prof. Daniel Brainard, Founder of Rush Medical College, Peter S. Macdonald.....	8
Address of the Retiring President at the Annual Meeting.....	12
Exercises of Commencement Week.....	14
Minutes of the Annual Business Meeting.....	17
Faculty-Alumni Annual Banquet.....	22
College Notes	25
Clinics, Hospitals and Societies.....	27
Alumni Notes	29
In Memoriam	29
Correspondence	30
Rush Medical College Library.....	31
A Little Humor Now and Then.....	32

The Library of Rush Medical will be glad to send for any medical books, journals or reprints which you may wish to dispose of Notify the Librarian by postal or telephone.

"THE DOCTORS OF THE LAWS" *

JUDGE NATHANIEL C. SEARS

CHICAGO

Judge Sears spoke in part as follows:

Mr. Toastmaster, Ladies and Gentlemen:—I daresay that we have all of us at sometime wondered why the universities of the Middle Ages ever saw fit to apply the title of Doctor to members of several different professions. In childhood we are taught to regard the title of Doctor as the peculiar property of the wise-looking gentleman—or lady—who compels us to stick out our tongues, and it is with a distinct shock that we learn later in life that there are others, and that as a matter of fact the degree of Doctor was conferred upon men of the Law and men of the Church for 200 years before it was appropriated by the medical fraternity.

Quite likely the learned men of medieval times foresaw that both the body of theology and the body of the law would, in the course of history, need considerable doctoring—and in this they were not mistaken. It is a far cry from the theology of the Inquisition to that of Cotton Mather, and quite as far from Cotton Mather's particular brand to the broad and liberal doctrines of to-day—such as are represented by your distinguished theological guest of this evening. And in the course of that progress the body of theology has needed some correctives, occasionally a severe purgative, now and then an emetic, and at times the heroic work of such theological surgeons as Savonarola and Martin Luther—yes, and David Swing, for gentle David Swing could handle the knife with skill and firmness in cutting out abnormal and unwholesome growths. But through it all the body of theology has come down to us in our day a healthier body, sweeter and saner, more human and none the less Divine.

So, too, the body of our laws has required its correctives. Its skeleton was cast fifteen centuries ago in the forest tribunals of the half-wild men of northern Europe. After it had been deported to the British Isles and had begun to take on flesh, it fell victim to ills incident to that process. There were certain royal prerogatives which had to be removed, and there was a bit of skilful skin-grafting done at Runnymede in the shape of Magna Charta. And then, when it was brought to this continent in the cabin of the *Mayflower* and set loose in the colonies, it became afflicted with certain climatic ills. There was the fever of witchcraft in New England to be allayed and the malignant growth of slavery in the South, which could only be cut out by the sword. But through it all it has come down to us

* Delivered before the alumni of Rush Medical College.

a right good body of law, better far than that of any other land—because in no other can be found the true spirit of pure democracy which pervades our law. But the body of our law and the body politic are not yet through with evils and with perils. There still remain the two evils—Graft and Greed—yet to be dealt with. We may, perhaps, dare to hope that the epidemic of graft has been checked in these later days, and that with the stimulus of an awakened national conscience it may yet be stamped out.

As in the life of man from infancy to age, so the nation in the various periods of its progress finds new perils incident to each period. The perils of the past we know from memory or read in history. No man with open eyes, who dares to look, can fail to see, and no man, who thinks, dare shut his eyes to the peril of our day. If the impending conflict, between the millions who have not and the few who have, is yet to be averted—as God grant it may—it must be not alone through eliminating the virus of anarchy from the veins of the ignorant and the poor; but as well by infusing the germ of fair dealing into the hearts of the powerful and the mighty.

It may perhaps be suggested that the end of the nation's safety can be attained through wise and just laws, fairly and fearlessly enforced. And it is true that much can be, much has been, done in that way. I believe that this peril is farther removed to-day than it has been for some years, and that this is so is largely due to the advent in public life of one man, one, who, when his hour of opportunity struck, like an armed knight leaped into the arena of American politics and threw down his gauntlet against every form of oppression and wrong. They say that he has his faults, an intense egotism, a brutal disregard for time-honored prerogatives of courts and congresses. But what does that matter to us—that or other little faults, seen big through the lens of much publicity? What does it matter to you and me, if only it be true that he has done more to quell the rising tide of discontent among the poor and humble of his countrymen, more to stay the growing peril which springs from such discontent, more to make it possible for you to hand down in safety your possessions to your children and your children's children, more than has been done by any hundred statesmen in the last quarter of a century? And he has done it by showing to the people that Law, not Wealth, is still upon the throne.

But not all the executive officers in all the land, nor all the courts and all the jails, can ever alone attain the nation's safety. It must be done as well through influences more subtle and more persuasive, such influences as can implant the Golden Rule in the hearts of the strong men, in whose hands rest the commerce and industries of the nation.

And this is the suggestion which I would humbly bring to you other doctors to-night, that we, whether doctors of Medicine, or

Divinity, or of the Law, should all become doctors of the body politic as well, and when need and opportunity occur, forgetting our little ambitions, setting aside our small, selfish interests, to do all that lies within our power to guard against this peril of the hour and to make the future of our beloved Republic safe and sure.

RESPONSE TO THE TOAST—"THE ALUMNI" *

DR. CHARLES B. REED, '87

CHICAGO

Mr. Toastmaster and Fellow Alumni:—In responding to such a toast, so many scenes and memories throng before the mind that it is difficult to select a series that would be unconfused.

It seems best, therefore, to go back to the tablets of history and present a few reflections inspired by the thought of Old Maskeekeeninee, our great predecessor and first alumnus.

It was in the early summer of 1674 when the good father Marquette, on his way to establish a mission among the Illinois Indians, pushed his bark canoe up the clear pellucid current of what is now called the "Chicago River."

He was greatly annoyed by its shallowness, which, as he says in his "Relation," would forever prevent its bearing any larger craft than the bark canoe.

As he reached the spot where the Harrison Street bridge now stands, he cast his eyes westward over the low soggy but flower-bestrewn prairie and observed a figure which aroused his curiosity.

Beaching his canoe, he walked westward with one or two of his followers, and as he reached the point where Paulina Street now runs, he recognized the figure of an Indian maiden standing with outstretched arms on a little knoll about a block away.

His attention was distracted momentarily by a flight of clamorous wildfowl, and when he looked again the figure had disappeared.

Puzzling over this curious phenomenon he arrived at the spot where she had stood, and there upon the ground over which her left hand had been poised, grew several stalks of maize, which, among Indian nations, symbolizes welcome and hospitality.

On the spot over which her right arm had been extended, there grew a large and lusty tobacco plant in whose thick and fragrant leaves the mingled souls of the sun and the rain had conjoined to produce those rare virtues which give it, throughout Indian tribes, the reputation of being a "great medicine." Then, turning to the little knoll on which her feet had rested he observed a curiously wrought calumet or pipe of peace upon whose bowl of red sandstone were carved many strange symbols which neither Marquette nor any of his followers could decipher.

* Delivered before the alumni of Rush Medical College.

He was greatly interested in his discovery, and, hoping to preserve it until his return, he buried the pipe on the little mound whence he hoped to take it with him to Quebec for elucidation.

It will be recalled that when Marquette returned during the grim rigors of the early winter that frail body had been driven to the limit of endurance by his indomitable spirit.

Passing the well-known spot on the river he turned his eyes sadly toward the West, and shaking his head he quoted the words of his favorite poet, "*tempora mutantur et nos mutamur in illis.*"

The times had indeed changed, and before he could leave the frozen shores of the great bleak lake he had attained that peace which passeth all understanding.

The years passed away.

The rough embattled walls of Fort Dearborn rose near the mouth of the little river, and under the shadow of the palisades there soon collected a small village of white settlers and a large band of Pottawatomies.

One day as one of the settlers was hunting west of the river, he espied an Indian teepee where none had been known to exist; curiously he walked toward it, and as he came near, hailed in a loud voice. In response to his call a stalwart Indian came forth from the tepee bearing in his hands a strangely wrought calumet whose bowl was filled and burning.

This he extended to the four winds and invoked the spirits of the air, and straightway concluded a treaty of peace with the white man.

At the conclusion of the silent ceremonial the white man asked for the meaning of those strange symbols which he saw upon the bowl.

Those, said the Indian, mean that this calumet is the gift of the spirit, and that here they have determined that a great Medicine Lodge shall arise.

Behold in me, Maskeekeeneene, the greatest medicine man of the Pottawatomies, and here I have erected my medicine lodge for the healing of my people.

Again the years rolled by, again the times changed. Old Maskeekeeneene in the fulness of his years also passed away. His life had been full of activity. Many Indians and some whites had lived or died under his more or less experienced care, but he was an enthusiastic devotee of his art and he practiced the best he knew.

Tempora mutantur et nos mutamur in illis.

The little settlement grew to be a thriving city, and into its vortex of hopes and fears pushed our energetic founder, Dr. Brainard.

Then came Uncle Allen, whose memory never grows dim, and Dr. Gunn, with all his worldly possessions, consisting, as he frequently told us, of a 50-cent piece and a negro cadaver.

All joined hands to exalt the young school which was appropriately named "*Rush*." After locating on the South Side and the North Side, and then just west of the river, what more natural could occur than that upon the spot where the pious Marquette saw the vision of the Indian maiden, on that predestined place where Maskeekéineene invoked the spirit of the air with the curiously wrought calumet, should arise the high walls of Rush Medical College?

Behold the result—for blocks around in every direction the ground is covered with secondary schools, hospitals, colleges, libraries and laboratories.

Nevertheless, my friends, high walls do not make a city, as some one has said, nor do lofty towers and numerous buildings make a great school.

It is the spirit that dominates those buildings and the men who walk those corridors that wield the scepter of power.

In this respect, too, Rush has been unusually fortunate.

To mention even the greatest would suggest that book of the Iliad, wherein are enumerated and described the black ships which bore the brazen-mailed Achaians to the walls of Troy, and yet as we survey that marching host we cannot fail to feel a thrill of exultation as we see them all, from Brainard to Billings, in proud possession sweeping by.

Nor is this all. The statues of Buddha represent him as covered with multiple breasts as a symbol of fertility and nourishment, and so from her multiple breasts has our Alma Mater given scientific sustenance to thousands and thousands of her sons.

The sequel is always the same. Whenever the nursling becomes strong enough to stand alone he seizes a torch, lights it at the Vestal flame which burns eternally on the shrine before our goddess, and rushes forth into the world.

But yet in the joy of lighting the torch, in the exhilaration of the running, nor yet in the pleasure of watching it gleam through the mists and gloom on the highways of life, does the bearer ever forget his Alma Mater.

When the spent and weary runner guards with reverent and trembling fingers the fast-expiring flame, even then his face turns with wistful longing, somewhat mixed with wonder, toward that sacred spot from which he received his first inspiration.

Always in the forefront of human endeavor, he wonders what fate the God of battle has allotted to Old Rush. She, too, is always in the forefront of the contest.

In the battle of the Standards, in the conflict of the colleges, her white plume, like the helmet of Navarre, is ever in the thickest of the fray.

Her strife is for the benefit of her sons, their achievements come as fluttering leaves to enlarge her victorious garlands. Every year

she demands more from her students, every year she exacts more from her graduates, and every year they find it more difficult to uphold the traditions she presses upon them.

How can these standards be most successfully upheld, and how may the alumni live up to those traditions which surround us like a rising tide?

Let me whisper a word to the youngest graduate—let me confide the secret to the breast of our latest brethren.

Hold fast to the illusion of your youth, or, as the sturdy philosopher of Concord put it, cling to your youthful vision. When you say, "As others do, so will I," when you say, "I renounce, I am sorry for it, my early visions," when you say, "I must eat of the best of the land and leave my early visions and my romantic expectations to a more convenient season," then dies the man in you, then perishes the last bud of poesy of imagination, of intellectual attainment and of scientific advancement, just as it has perished before in thousands and thousands of hearts.

This is the crisis of your life; look well to it that you hold fast to your youthful vision, and if the time ever comes, as we hope and pray it may, that future generations will look back on us as we look back on old Maskeekееneenee, may they say of us as we say of him, he fought a good fight and he lived up to the best ideals of his time and environment.

Hold fast to your youthful visions, then; these generous sentiments arise from the glowing enthusiasm of youth, and are far more reliable as a rule of conduct than the maxims dictated by the cold sapience of age.

Hold fast to your youthful visions, for in this way can the conditions become soonest fulfilled which were predicted of old by our predecessor and first alumnus, old Maskeekееneenee, when, standing on the little knoll in front of his teepee, he looked toward the tossing waters of the great lake, and, extending the magic calumet to the four winds, saw the fragrant incense swirling upward to the azure sky, and his eyes fell upon those mystic symbols engraved upon the bowl of red standstone which he interpreted to mean. "On this spot shall arise the greatest Medicine Lodge in the World."

REMINISCENCES OF PROF. DANIEL BRAINARD, FOUNDER OF RUSH MEDICAL COLLEGE *

PETER S. MACDONALD

Forty-six years have rolled on, with their accustomed speed, since the commencement exercises of Rush Medical College of 1864.

From all the information that I can gather of our graduating class, to the number of seventy-six, there are *only eight of us*

* Delivered before the alumni of Rush Medical College.

left. What truth there is, indeed, in that old classic proverb: "Tempora Mutantur, et nos, Mutamur in illis." Times change and we change with them.

At that period the Civil War was coming to a close. Many of the graduates were intending to enter the medical department of the Army. Others, again, returned home expecting to fill their preceptor's offices, while the latter were serving their country.

Rush Medical College, in those days, was one of the *leading medical schools; to-day she is the peer of any.*

Prof. Daniel Brainard, the founder of Rush Medical College, was born in the year 1812 in the state of New York.

In the year 1834 he received his degree of Doctor of Medicine, at the Jefferson Medical College, Philadelphia, Pa. Two years after his graduation, he delivered a course of lectures on Anatomy and Physiology, in the Oneida Institute of New York State. In 1837 he obtained a charter for the erection of Rush Medical College, from the legislature of Illinois.

In 1839 he visited Paris, where he remained for two years, perfecting himself in all matters pertaining to his profession, visiting all the celebrated schools of that city. Upon his return, he delivered a series of medical lectures in St. Louis, Mo. Shortly after returning home, he began to make all the necessary arrangements for the erection of the college.

Some years ago I received a complimentary copy of a monograph from the author entitled "Early Medical Chicago." I will read you a brief extract that I have copied from it:

Dr. Daniel Brainard, the founder of Rush Medical College, was a master of many of the collateral branches of medical science. He was a botanist and a geologist.

He excelled also in literature, and his contributions to medical periodicals are, many of them, masterpieces of terse, vigorous and lucid expressions. A generation of men who never looked in his face are yet familiar with his features. He was tall and vigorous in frame, with a large, finely shaped head and keen, penetrating eyes. He seemed, indeed, to possess the three qualities which were considered in the sixteenth century to be the prerequisites of a good surgeon, viz.: "The eye of a hawk, the hand of a woman and the heart of a lion." Dr. Brainard's name is graven ineffaceably upon the annals of American surgery. His successors may well emulate his indomitable perseverance in the face of apparently overwhelming obstacles, his unflagging industry and the acquisition of the science and skill which perforce spring from these high qualities.

The paragraph that I have just read to you is from the gifted pen of the present distinguished professor of dermatology of Rush College, Dr. James Nevins Hyde.

In the zenith of Professor Brainard's prosperity he responded to every call—rich or poor. I wish to take this opportunity of refuting a slander that I have heard on several occasions since his death

—that he was not charitable to the poor. Such, ladies and gentlemen, was not the case; it is as false as *hades*—a base fabrication! Being in his office for a period of nearly two years, I had ample opportunities of knowing.

Whatever may have been his faults, he certainly was generous and kind to the destitute. On several occasions, when it was reported to him that some of the surgical cases of the dispensary were not progressing as favorably as we would like, at his own suggestion, he requested me to accompany him to their homes. Not to the mansions of wealth and luxury, but to the home of the indigent, many of them, in a semidestitute condition. Among the latter class, from my own personal knowledge, it could be truly said of them that

None knew him but to love him;
None named him but to praise.

Methinks I hear some of you gentlemen remark, Where were your hospitals? In reply to that interrogation, they were few in number. Professor Brainard's private hospital, exclusively for surgery, was situated on Rush Street, Cook County Hospital was situated on Eighteenth and Arnold, only organized in 1866, and that, *late in the season*, by the untiring and zealous efforts of the lamented Drs. Ross and Amerman, purposely, "for the care of the indigent poor, and also for giving medical students the advantages of clinical instructions." Mercy Hospital was organized in 1851, where it is now located. The Marine Hospital was then located corner of Michigan Avenue and Water Street.

Prof. Daniel Brainard at one time was surgeon-in-chief of both the Mercy and Marine hospitals.

As a teacher and lecturer, he was the peer of any; in fact, he was without a rival; as an able medical writer has stated, that "*the order, the method and clearness of his lectures, have never been surpassed.*"

He had a wonderful command of the English language; in a word, he was an orator. Physicians visiting the city would frequently call at his office and inquire what were his hours for lecturing and giving clinics. In fact, among the medical profession, he was better known abroad, and in other states, than in his home city—Chicago.

In his manner he was courtly and polished, yet somewhat reserved. When you were in his presence you could not but be impressed. When conversing with him, as one of his old colleagues of the old faculty said, "he was the very soul of dignity." Yet, when you became acquainted with him he was as approachable as a child—kind, genial and had as warm a heart as ever beat within the breast of man.

He was an honorary member of the Surgical Society of Paris and also of the Medical Society of Canton of Geneva. In 1854 the St.

Louis Medical Society offered a prize for the best thesis on the treatment of ununited fractures, for which he was the successful competitor.

His enthusiasm for the advancement and progress of Rush Medical College knew no bounds, being the most indefatigable and laborious member of the faculty. He lectured from 5 to 6 p. m. five days in the week; clinics from 3 to 5 p. m. Saturdays.

When he entered that crowded lecture room *silence reigned supreme*, all eager to catch every word that proceeded from his lips.

That you may form some idea of the interest he took in the graduates—at every commencement it was his custom to give them some wholesome advice after the presentation of diplomas. I regret that I am unable to give you a verbatim et literatim copy of some of his farewell addresses, but here is a brief synopsis of one that I have taken from an old college notebook of mine, and, by the way, it is just as applicable to the old practitioner, as to the recent graduate.

We send you forth with entire confidence that your future course will be creditable to yourselves and to the institution whose honors you bear. We have an interest in your success. Bear in mind that if your Alma Mater approves of your conduct, like a fond mother, she will ever welcome you with outstretched arms. Occasionally, when an opportunity affords itself, review your text-books, and particularly your anatomy, for it is the foundation of your studies.

Prof. Daniel Brainard died from cholera on the 10th day of October, 1866, shortly after his return from his second visit abroad.

Permit a digression for one moment.

There was an epidemic of cholera raging in our city at that time. The mortality was fearful for the time that it lasted. To the best of my recollection, it continued in an epidemic form for nearly four weeks; at the end of that time it began to subside, only isolated cases occurring here and there. Bodies were interred as soon as possible after dissolution.

In accordance with the official census, under the school law, the population of Chicago in 1866, was 200,418. The first isolated case of cholera occurred July 21, 1866. Last death from cholera reported was Nov. 26, 1866. The number of deaths from cholera *alone* in the fall was 999.

I am of the opinion the latter number is quite deficient. There were many deaths of cholera in those days not reported.

The statistics that I have read to you were obtained from the Chapter on Medical History in Volume Two of the "History of Chicago, by Andreas," on file with the Historical Society.

Such municipal records as existed were destroyed by the fire of 1871.

Much honor and credit are due members of the medical profession, who labored assiduously and faithfully night and day in the midst of danger, endeavoring to check the progress of the disease.

A number of prominent and wealthy citizens, as well as several members of our profession, succumbed to the plague.

Let me tell you that every method of treatment was alike, uncertain and unsuccessful. Do what we would, apparently all genuine cases of cholera died.

Pale death, with equal steps for rich and poor,
Knocks at the palace and the cottage door.

I now ask your indulgence while I read you an extract taken from the *Chicago Medical Journal and Examiner* of October, 1866, which was written the day following Prof. Daniel Brainard's death:

The melancholy event of Dr. Daniel Brainard's death excited a profound sensation in our community. The day was dark and gloomy, the epidemic of cholera was at its height, the ensigns of mourning were overshadowing the public buildings and dwellings in memory of Dr. Brainard and those officers of the city government whom the pestilence had stricken.

The members of the medical profession gathered at the court house to unite their testimonials of respect for the honored dead and a solemn assembly at St. James Church told how deep was the feeling of the loss which we have sustained.

Coming from the East thirty years ago, Dr. Brainard discovered in the little town, under the walls of the old fort, near the Chicago river, an opening for the exhibition of his genius. Twenty-three years ago he laid the foundation of Rush Medical College, an institution which stands to-day the proudest monument of its author's fame.

He was the leading spirit in the management of this journal, and from that day to the present it would be hard to find anything of value to the profession in the northwestern states which cannot be traced directly to its source, in the teeming brain of this wonderful man.

Honored and fondly remembered preceptor, may you rest in peace; green be the grass that grows over your grave. Sacred the spot where you lie; and ever bright be the place in the minds of those you left.

In conclusion, Alumni of dear Old Rush, although I begin to feel that I am getting old, notwithstanding I will not even breathe that cold and chilly word "Farewell," for, to tell you the truth, I have a dislike to; but one which to me is more musical and of a sweeter tone, Adieu, until we meet again!

ADDRESS OF THE RETIRING PRESIDENT AT THE ANNUAL MEETING

Gentlemen of the Alumni Association of Rush Medical College:

As your retiring President I have prepared no scientific paper, but a few thoughts which will perhaps be fully as appropriate for this hour.

The labors of another year have ended for us all. Another cycle of events has been completed in the history of this body of men.

For twelve months you and I have each labored to the best of our ability in the cause of suffering and afflicted humanity.

Again we have met to welcome new recruits to our ranks and say to each alumnus who signs with us to-day, "Welcome, Doctor, to the Alumni Association of Rush Medical College; we realize the help that you will be to us, and perhaps that we may be to you."

The world is large, there is work for the doctors everywhere, and you will get your share to do. It may come slow to some, faster to others, but be patient, studious and industrious; and above all else conscientious and honorable; painstaking in all things, and then your rewards are as sure to come as the sun is to rise and set in its daily revolutions.

Once we old members were on the threshold starting out from our dear old Alma Mater to enter upon the practice of a chosen and learned profession and devote our lives to the science of medicine. We bid you welcome to labor on with us.

I read in the preface of an old book the other day—a Pharmacopœia published in 1694—a few lines which will bear quoting here: "It is generous to be good to mankind; and the more voluntary it is, the more acceptable. For my part I owe so great a friendship to the world, that I wish every man understood the art as well as I do. And I should be content upon the condition, that it would please the most good and infinite being to bless the sons of men with a perpetual state of health to seek out some other way of living."

The quaint old text, the strange formulæ and nostrums set forth in this ancient book furnish quite an idea of how little our earlyday men knew of disease and its cure, but the same noble, self-sacrificing, earnest service to help their fellowmen was in the hearts of the men of medicine then that exists to-day.

Our profession is noble, our men are better qualified every day; our leaders are digging out new truths, ever seeking new weapons to fight with; finding the innermost accounts of disease and working out towards the day when perhaps the thoughts of our ancient writer of three centuries ago can indeed be realized, when we may all have to seek out another way of living because everybody will be well and keep well. But that day is not yet by any means.

The physician at the bedside of the sick has ever been the one lone star of hope, and he always makes good, when he can. That is your—our mission.

It is forty-four years now, since I, a boy of tender years, entered the halls of Rush in 1866, in the old college building built under the directions of Prof. Daniel Brainard in the forties. In 1867 the new college addition was built on an adjoining corner. Dr. Brainard was dead, Dr. Gunn succeeded to his chair of surgery. In '69 I took my examinations with my collegians. There were 117 of us who passed that year, of which 76 have passed away, 41 are on the

mailing list, and 10 of them promised to be here to-day and act on my reception committee for this meeting; they did not all come but some did and they were at class luncheon with me at noon. We bow our heads in memory of those who have gone, and quote from the letter sent in by one of our number, "I think we will not have a great many more meetings of the class of '69."

I was but eighteen years old and had to wait three years for my sheepskin but I received the certificate of the Faculty Secretary, stating that I had passed for my degree of M.D. and it hangs on the wall of my office to-day. I call it my little diploma. It has upon it the picture of old Rush in '69, and I fancy, Gentlemen, that very few of you have a picture of that college to-day. It was burned in the Chicago fire Oct. 9, 1871.

In 1871, at the close of the term in college, like to-day, the class met in the upper lecture room and formed this association.

I was its first secretary and as such drew up the first constitution, which was adopted at our next meeting, called by me and held in the Grand Pacific Hotel, I believe in 1873, and under which this association was conducted for about twenty years, when the present revision was made.

One year ago you saw fit to honor the old class of '69 by electing me your president. It was a surprise to me, and to us all, but a very pleasant one. I have not had much to do officially beyond the appointing of committees and helping here and there as opportunity was afforded, but my committees and editorial board have been veritable wheel horses and their very excellent reports show what has been accomplished.

We now return the trust reposed in us with the thought that our successor will find his task the pleasantest, his officers the most genially courteous, and his membership the most delightful to have dealings with of any body of men that ever lived. And may the spirit of the great men who have builded, of the institution of learning which they have made, and of the Great Physician himself, ever guide and protect you; make you one and all, our beloved Rush and her larger self, the great Chicago University, better and stronger in ourselves and in the hearts of men with every setting sun, until the perfect day when earth shall be no more and our work is done.

Chicago, June 15, 1910. RAYMOND LOCKWOOD LEONARD.

EXERCISES OF COMMENCEMENT WEEK

The exercises were carried out as announced in the April BULLETIN.

The baccalaureate sermon was delivered by the Rev. Henry F. Milligan.

The attendance at the clinics was good, and much interesting material was presented.

The class day program was presented in the upper amphitheater as announced.

In the evening the annual theater party was held. Quite a large number attended and reported a fairly good show. The play was the "Lottery Man."

The commencement exercises at Mandel Hall (University of Chicago) brought out a large attendance. The address of Dr. William J. Mayo, of Rochester, Minn., was listened to with great interest. We have not yet been able to obtain the copy of this address for publication, but are making efforts to do so.

The following is the program of the commencement exercises in full:

ORDER OF EXERCISES

- I. DOUBLE THEME, VARIED.....*Rousscau*
Mrs. George N. Holt, University Organist.
- II. THE PROCESSIONAL—TRIUMPHAL MARCH.....*Buck*
The Graduating Class.
The Faculty of the College.
The Official Guests of the Commencement.
The Faculty of the University.
The Trustees of the University and of the College.
The Deans of the College.
The President of the Board of Trustees.
The Commencement Chaplain.
The Commencement Orator.
The President of the University.
- III. THE PRAYER.
The Commencement Chaplain, REV. ALONZO KETCHAM PARKER.
- IV. THE PRESENTATION OF CANDIDATES FOR THE DEGREE
MEDICINÆ DOCTOR TO THE TRUSTEES AND FACULTY,
BY THE SECRETARY OF THE FACULTY.

*Donald Putnam Abbott
*Arthur Noble Aitken
*August Harvey Bauer
*Robert Louis Benson
*Archie Eli Brimmer
*Melbourne Clements
*Edward Lyman Cornell
*George Melville Crabb
*Julia Crotty
*Richard Benjamin Dillehunt
*Benjamin Howard Durley
*Erastus Smith Edgerton
*Frederick Howard Falls
*Ralph Stephen Fisher
*Earle Bloodgood Fowler
*Ralph Towns Gilchrist
*Johnson Francis Hammond
*Franz Heinrich Harms
*Clarence Clyde Hickman
*Harry Richard Hoffman
*William Henry Jamieson
*Clarence Arthur Johnson
*Arthur Nuta Kitenplon
*Julius Ernest Lackner
*Schuyler Colfax Lambert
*Harrison Andrew Lyding
*Joannes Elias Mavros
*Fletcher Olin McFarland
*William George McKay
*John Francis McKie
*Franklin Chambers McLean

*Robert Edgar Miltenberger
*Adelbert Montague Moody
*John Beverly Moore
*Edward Parker Moser
*Louis Manning Munson
*Frank Clay Murrah
*Fred Blue Olentine
*Arthur Columbia Pearman
*Irving Perrill
*Lafayette Rees
*Robert Clifton Reimche
*Robert Orlando Ritter
*James Thomas Rooks
*Emile Rose
*John Gaston Ryan
*George Banker Schwachtgen
*Raymond Alvah Seiler
*Alfred Marion Shaw
*James Hubert Skiles
*Clifford Eben Smith
*George Heath Steele
*Frank Everett Stanton
*Hirrel Harriet Stevens
*J. Guy Strohm
*Charles Henry Swift
*Eugene S. Talbot, Jr.
*John Lear Treacy
*Howard Granville Twining
*Nicholas Bacon Wagner
*Martha Anna Welpton
*Edward Franklin Zoerb

The degree of Doctor of Medicine was conferred on the following students at the close of the summer quarter, Sept. 3, 1909:

- | | |
|-------------------------|------------------------|
| *Ibrahim Abadir | *Carl Floyd Hartman |
| *John Henry Breyer | *Edwin Garvey Kirk |
| *Horatio Alford Brown | *Charles Newberger |
| *Carl H. Davis | *Harrison Ross Rogers |
| *Darwin Delap | *John William Thompson |
| *Charles Darwin Enfield | |

At the close of the autumn quarter, Dec. 20, 1909:

- | | |
|-------------------------|--------------------------|
| *Albert Howard Baugher | *Willard Elizabeth Park |
| Walter Eugene Garrey | *William Henry Rowe, Jr. |
| *Arthur Stanley Granger | *Charles Schott |

At the close of the winter quarter, March 16, 1910:

- | | |
|-------------------------|-----------------------|
| *John Ripley Corkery | *Alvin Charles Tanner |
| *Charles Wilson Lamme | *David Duke Todd |
| *Clarence Axtell Penman | *Walter Verity |
| *Robert Holbrook Smith | |

* The asterisks are prefixed to the names of those members of the class who have gained prizes or secured positions by competitive examination and appointment as internes in hospitals.

V. THE CONFERRING OF DEGREES.

VI. MUSIC—CATHEDRAL MARCH, FROM LOHENGRIN.....*Wagner*

VII. THE AWARD OF FELLOWSHIPS, OF PRIZES AND OF HONORS

The Alumni Fellowship in Pathology—

GEORGE FREDERICK DICK, M.D.

The Fellowship in Pathology—FLOYD BURKE RILEY, A.B., M.D.

The Dane Billings Fellowship in Medicine—

HOMER KING NICOLL, A.B., M.D.

The Nicholas Senn Fellowship in Surgery—

WILLIAM TALMADGE HUGHES, S.M., M.D.

The Benjamin Rush Medal—FRANKLIN CHAMBERS MCLEAN, S.B.

The J. W. Freer Medal and First Prize—

ROSWELL TALMAGE PETTIT, S.B.

The J. W. Freer Second Prize—DAVID DUKE TODD, S.B.

The Daniel Brainard Medal—WILLIAM HENRY OLDS.

The DeLaskie Miller Prize—GEORGE BANKER SCHWACHTGEN.

The Henry M. Lyman Prize—JAMES THOMAS ROOKS, A.B.

The John A. Wyeth Prize—JOHN GASTON RYAN, S.B.

VIII. THE DOCTORATE ADDRESS.

The Necessity of Cooperation in the Practice of Medicine.

WILLIAM J. MAYO, A.M., M.D., F.R.C.S., D.Sc., LL.D.

IX. THE BENEDICTION.

The Commencement Chaplain, REV. ALONZO KETCHAM PARKER.

X. THE RECESSIONAL—FESTAL MARCH, FROM TANNHAUSER.*Wagner*

FELLOWS APPOINTED AT THE UNIVERSITY FOR 1910-11

GEORGE WILLIAM BARTELMEZ, S.B., Zoölogy.

EDMUND VINCENT COWDRY, A.B., Anatomy.

HARRY ELLSWORTH EWING, A.B., A.M., Zoölogy.

JOHN WILLIAM EDWARD GLASFIELD, S.B., Chemistry.

GEORGE LESTER KITE, S.B., Zoölogy.

JOHN JOSIAH MOORE, S.B., Pathology.

ROSWELL TALMAGE PETTIT, S.B., Pathology.

PAUL DAVID POTTER, A.B., Chemistry.

ERNEST LYMAN SCOTT, S.B., Physiology.

SHIRO TASHIRO, S.B., Physiological Chemistry.

ARTHUR LAWRIE TATUM, S.B., Physiology.

CARL CHRISTIAN TODD, S.B., Chemistry.

HARLAN LEE TRUMBULL, A.B., Chemistry.

LEROY SAMUEL WEATHERSBY, A.B., Chemistry.

FRANKLIN LORENZO WEST, S.B., Chemistry.

STANLEY DAVIS WILSON, A.B., Chemistry.

PRIZE SCHOLARSHIPS IN THE MEDICAL COURSES AT THE UNIVERSITY OF CHICAGO GRANTED TO INCOMING STUDENTS FOR THESES INVOLVING ORIGINAL INVESTIGATION.

First prize to C. O. Melick of Ohio University, Athens, Ohio, for a thesis entitled "The Sterilization of Water by Electricity."

Second prize to W. Otis Callaway of the University of Colorado, Boulder, Colo., for the thesis entitled "The Viability of the Tubercle Bacillus at a High Altitude."

Third prize to A. R. Paxton of Miami University, Oxford, Ohio, for the thesis entitled "Abnormalities of the Human Arm."

MINUTES OF THE ANNUAL BUSINESS MEETING

The annual business meeting of the Alumni Association of Rush Medical College was held Wednesday, June 15, 1910, in the parlors of the Auditorium Hotel. The meeting was called to order by the president, Dr. R. L. Leonard, '69.

The minutes of the last meeting were read and approved.

It was moved by Dr. Cary that a nominating committee, consisting of one member from each class present, be appointed by the chair. Carried. Dr. John Edwin Rhodes, '86, was made chairman.

The Secretary's report was then read and approved and ordered filed.

The Treasurer's report, upon being read, was submitted to an auditing committee consisting of Drs. John Edwin Rhodes, J. R. Barnett, Joseph W. Edwards.

The Necrologist's report was then read by Dr. Ormsby and adopted by a rising vote. It was ordered to be filed in the archives of the Association and published in THE BULLETIN.

The Executive Committee reported briefly through its chairman, Dr. Cary. Adopted.

The report of the Fellowship Committee was read and approved.

The Fellow also reported briefly on his work. A full report is to be given later.

The Auditing Committee reported that the accounts of the Treasurer were found correct. The report was ordered signed and filed.

Dr. Craig reported verbally for the Alumni Reunion Committee. Adopted.

Alumni Relations Committee, no report. (Received after meeting and published in THE BULLETIN.)

MISCELLANEOUS BUSINESS

It was moved and carried that the Secretary's assistant be given an honorarium of \$25 for clerical services rendered.

Dr. Dodson moved that when the Executive Committee is appointed this year there be appointed six members, two to serve one year, two to serve two years and two to serve three years; and that

hereafter two members be appointed each year to succeed the two whose terms of office expire. Carried.

Dr. Dodson spoke very earnestly regarding the membership of the Association, comparing our western institutions with those of the east where college enthusiasm and class spirit are so much more pronounced. He suggested that every member present guarantee ten members of his class as members of the Association during the next ten months, and that the names of these prospective new members be sent to the Secretary in order that he might communicate with them.

In response to this suggestion quite a number came forward with their names.

It is to be hoped that this little fire of enthusiasm may not die out, but that the suggestion may bear fruit.

The presence of Dr. Zearing of the Class of 1850 aroused enthusiastic applause.

The retiring President, Dr. Leonard, delivered a very able address, which was well received.

The meeting adjourned for a short reception, followed by the banquet.

At the banquet the Nominating Committee announced, through its Secretary, Dr. B. M. Linnell, the selection of the following alumni as officers for the ensuing year:

President—Dr. John W. Tope, 1870, Chicago, Ill.

First Vice-President—Dr. Thomas Fitzgibbons, 1882, Milwaukee, Wis.

Second Vice-President—Dr. E. P. Murdock, 1879, Chicago, Ill.

Third Vice-President—Dr. Peter S. Macdonald, 1864, Chicago, Ill.

Necrologist—Dr. Charles A. Parker, 1891, Chicago, Ill.

Secretary—Dr. Alfred N. Murray, 1901, Chicago, Ill.

Treasurer—Dr. Alexander F. Stevenson, 1898, Chicago, Ill.

The Nominating Committee further recommended that Dr. Frank Cary, 1882, be appointed by the President as chairman of the Executive Committee to serve for a period of three years.

On motion, the nominations of the committee and the recommendation were approved by a vote of the Association.

SECRETARY'S REPORT

The end of another year finds the Alumni Association still active, although there has been no appreciable growth in the membership.

The paid membership at the present time is 490. This includes all those who have remitted \$1 to the Treasurer during the year just closed, and is considerably less than at this time last year. Since probably a majority of the members pay their dues at the annual meeting, this number will no doubt be much increased before the end of commencement week.

With over 4,000 alumni of the college, it really seems that we should have a larger paid membership than this. It was the hope of our former Secretary, Dr. Linnell, that the number would reach 1,000. And there is no reason why it should not if everyone would do his duty to the Association and to his Alma Mater.

In connection with the remittance of dues, your Secretary wishes to call attention to the *pink slip*, which is enclosed with THE BULLETIN, of those who are in arrears. Quite frequently slips are received upon which the disposition of the money is not indicated—whether for dues or for the fellowship fund. It would simplify matters greatly if the slip were filled out *specifically*. Not infrequently no name is signed, or the slip is absolutely blank, so that it is, of course, impossible to give proper credit. If, when remitting, members would also specify the class, this would greatly assist in filing the cards in the Secretary's office.

During the past year THE BULLETIN has appeared in a form somewhat different than heretofore. The determination to enlarge it, place a cover upon it, make it a higher class publication and issue it quarterly, was arrived at after due consideration by members of the faculty and the editorial board. Consequently, it appeared in its new dress for the first time last October; a second edition appeared in January; and, a few weeks ago, a third edition, containing the program for commencement week, and other matters relating to the college and the Association.

The character of the contributions in the various editions has been of high class, and those who have taken the trouble to read them have no doubt found much that was interesting and instructive. Such articles as "Recent Advances in Obstetrics," by Dr. Carey Culbertson, and "Medical Clinics of Germany," by Dr. James Henry Honan, are quite fit to grace the pages of the best medical journal published.

The indifference of many of the alumni regarding THE BULLETIN and the alumni affairs in general, for that matter, is deplorable. Your Secretary fully realizes that not a small percentage of the members toss their BULLETINS into the waste basket, without even condescending to glance at the Table of Contents. As to whether THE BULLETIN is a success or not, and whether the expense of its publication is justified, in view of this indifference on the part of so many of the alumni, are matters which remain to be decided. Each issue represents a considerable amount of work; more, perhaps, than anyone realizes who has not taken an active part in editing such a publication. Your Secretary is constantly pleading for contributions to THE BULLETIN, but so far has been unable to obtain such contributions without considerable effort.

Each of the three editions during the past year has cost approximately as follows: Printing, \$120; distribution, \$40; stamps, \$86; or a total of \$240 for each issue. During the coming year the

postage will be reduced one-half, by using lighter weight paper in the cover, so that the weight will not exceed the limit which is carried for 1 cent. In other words, each issue will cost approximately \$200.

An effort was made to have THE BULLETIN entered as second-class matter, in order to reduce the expense of issuing it. This, however, was found impracticable on account of the restrictions imposed by the postal authorities.

There is no good reason why THE BULLETIN cannot be developed into a high-class publication, if members of the Association will only interest themselves in it by contributing to it. Our neighbor, the *Northwestern Medical*, has a journal which is actually a valuable medical reference work, while Johns Hopkins has a publication which is a classic.

As to receiving THE BULLETIN, if you will kindly notify the college of any change of address, or of failure to receive it, it will be seen to that a copy is sent you.

The Fellowship Committee, under the able chairmanship of Dr. George H. Weaver, continues to be one of our most important standing committees. The work being done by the committee is such as should make us not only glad but anxious to contribute annually our dollar to the support of the Fellow. The particulars regarding this work will be given in the report of Dr. Weaver, and in the personal report of the incumbent Fellow.

During the year, quite a number of reunions have been held. These have been reported in detail in the various issues of THE BULLETIN, and need not be elaborated upon here. Mere mention of them will be sufficient.

The annual luncheon of the Rush Alumni of Minnesota was held last October. There were 26 present, and an enthusiastic and enjoyable time was had.

The annual luncheon of the Rush Alumni of Indiana, also last October, at which 25 were present, was an occasion long to be remembered.

Of class reunions, that of the Class of 1890, held in Chicago in March, was perhaps the most successful in the history of the college; 52 members of the class were present. A full report appears in the April BULLETIN.

The Class of 1900 held its tenth anniversary at the Union Restaurant on June 13, 1910. Nearly 30 members were present, and the meeting was a pronounced success.

Although an attempt was made to arrange a general reunion at St. Louis during the A. M. A. meeting, this proved unsuccessful, owing to the failure of the members to respond to the invitation. However, about 30 of the alumni got together on June 8, 1910, and held a rousing impromptu reunion, which doubtless answered the purpose equally as well.

Report of the Treasurer—1909-1910

RECEIPTS

Balance on deposit June 15, 1909.....	\$131.91
Alumni Association dues.....	288.55
Advertising—BULLETIN—to June, 1909.....	60.00
Rush Medical College—	
Advanced on postage of BULLETIN.....	253.58
Balance on one-half cost of BULLETIN.....	159.49
Total	\$893.53

EXPENDITURES

Share of banquet, June, 1909.....	\$ 14.74
Appropriation voted secretary's assistant, June, 1909.....	25.00
Stationery	6.75
Expenses secretary's office to Dec. 16, 1909.....	2.97
Exchange on check outside Chicago.....	2.10
Bank charge on under deposit, for August, 1909.....	1.00
Cost of BULLETIN, four issues.....	826.13
Total	\$878.69
Balance on hand.....	14.84

REPORT OF ALUMNI RELATIONS COMMITTEE

J. W. PETTIT, 1884, Chairman: The committee, during the last three years, has sent out a letter to all the principals of high schools and presidents of smaller colleges throughout the west and north-west, and has located, first and last, two thousand medical students to whom literature has been sent. This year the faculty of Rush thought it unnecessary for us to send out a communication; therefore, we did not do so.

The work of the committee has been very satisfactory to the faculty, and they believe has been productive of good results.

REPORT OF THE FELLOWSHIP COMMITTEE

GEORGE H. WEAVER, 1889, Chairman: One year ago at the annual meeting of the Association, the committee reported \$500 on hand for the support of the Fellow during the coming year. On Jan. 1, 1910, the committee had secured pledges for each of the two following years, \$500 for each year. Since the pledges were completed, those for the first year have been collected with a few exceptions, so that we now have on hand nearly \$500 for next year. Between 300 and 350 alumni contributed to this special fund. Considering the evident value of the fellowship and the small contribution asked, it is a matter for wonder that so much effort is needed to secure the required amount. We hope each year that we may be able to raise the amount paid to the Fellow, but it always requires personal effort to get the \$500.

We hope that the committee selected for next year may receive the active support of a large number of alumni.

REPORT OF THE ALUMNI FELLOW.

G. F. Dick, M.D.: Owing to the lack of time and the unfinished condition of the work, only an abstract of the work done up to the present time will be given.

The work concerns the diarrheal diseases occurring endemically at the Cook County Dunning Institutions.

Dysentery in the various hospitals for the insane in both this and other countries has been recognized to the extent of receiving the special term of "Asylum" dysentery. The investigations, however, of the etiology and attempts at therapy have not been as extensive as might be expected. A notable exception to this is the investigation of the Danvers Hospital dysentery occurring in the summer of 1908. The etiology was well worked out. Bacilli of the type of Shiga and in a few cases of the Flexner type being found.

Little seems to have been attempted in any of these investigations as to specific therapy.

The work on the dysentery at Dunning, which is in a stage to be reported on, concerns the etiology.

Previous to this study, work by the house staff pointed very strongly to house flies as a means of dissemination of the bacilli. Where it was possible to exclude flies from the patients and their food, cases were markedly decreased in number.

Bacteriological examination of a number of dysenteric stools has resulted in the isolation of bacilli having the cultural characteristics of the Shiga type of dysentery bacillus, and agglutinin and variation in opsonin were found in the patient's blood. The bacilli were also agglutinated with serum of a goat immunized against Shiga bacilli. Flexner organisms were isolated in a smaller number of cases.

The determination of the etiology, it is hoped, will result in an adequate method of prophylactic treatment.

FACULTY-ALUMNI ANNUAL BANQUET

The joint banquet of the Faculty and Alumni to the Class of 1910 may be regarded as a complete success. Following the reception in the parlor of the Auditorium at 6:30, our guests and the members of the Association, answering to the roll call of classes, formed in line and proceeded to the banquet hall, where covers were laid for 250. Every place was occupied, and all were amply served. Interrupting the buzz of the conversation, every now and then, the Class of 1910 would burst out either with the good old R-U-S-H, Rah, Rah, etc., or with some catchy popular melody.

At the speaker's table, aside from those who were on the program, were many members of the faculty and one or two representatives of the University.

About 9 o'clock the tables were cleared, and the program of the evening was opened by the introductory remarks of the presiding officer, Dr. R. L. Leonard, who introduced the toastmaster of the evening, Dr. William H. Wilder.

Dr. Wilder filled the responsible position in an admirable manner, introducing the speakers with many witticisms and relating many appropriate anecdotes concerning each individual.

Owing to the sudden inability of President Judson to be with us, Dr. John M. Dodson very kindly consented to respond to the toast "The University," and had he been given days in which to prepare his remarks, he could not have delivered a more interesting and enjoyable address on the subject of the University as related to medical education.

The scholarly remarks of the next speaker, Judge Nathaniel C. Sears, appear elsewhere in this edition of THE BULLETIN. It is needless to say that they were listened to with rapt attention and created the excellent impression which his remarks always do.

The next speaker, Rev. Frank G. Smith, of the Warren Avenue Congregational Church, began his remarks in lighter vein, relating some of the best stories which it has been our pleasure to hear for many a day. It really is unfortunate that anyone should have missed them, for the terrific laughter and applause which followed them showed that everyone present held the same opinion regarding their worth. After thus introducing himself into the good graces of all present, Dr. Smith proceeded along serious lines, and delivered an extremely forceful and convincing address on the subject of professional ideals. Unfortunately, for the preservation of his remarks in the annals of the Association, they were extemporaneous, and we are unable to print them in THE BULLETIN. He said in part:

Prevention, not correction, should be the aim of the three great professions, law, medicine and the ministry.

It is not the chief business of the physician to snatch men from the jaws of death, although that is worthy when necessary; it is not the chief business of the lawyer to snatch men from the shadow of the penitentiaries; it is not the chief business of the ministry to snatch men from the gates of hell. Rather we should aim to do our work so that these men shall not be placed in those positions.

I believe I can tell in three words what our aim should be: To the physician I would say, inoculation; to the lawyer I should say, the juvenile court; to the minister I should say, child study.

The remarks of Dr. Peter S. Macdonald, 1864, were listened to with great interest, as they related to the founder of Rush Medical College, Dr. Daniel S. Brainard. They are published in this issue of THE BULLETIN.

Dr. Charles B. Reed, 1887, presented us with some extremely interesting facts regarding the first alumnus of the college. His address was both unique and enjoyable, and we are fortunate in being able to publish it herewith.

Dr. R. S. Fisher represented the Class of 1910 in an excellent manner, and spoke very earnestly upon various subjects which he chose for discussion.

During the banquet the oldest living graduate of Rush, Dr. James R. Zearing, of Chicago, of the Class of 1850, was called upon to rise, and was greeted with stormy applause. Dr. Zearing has, unfortunately, been deprived of his eyesight for several years, but apparently enjoyed everything to the utmost. He stayed till the end, which should certainly be a good example to many of the younger alumni who saw fit to leave rather early. This was a double celebration for him, as it was also his 81st birthday. During his time as a student in the school its founder, Dr. Daniel S. Brainard, who died of cholera during the epidemic of 1866, was still president of the college.

Between the speeches we were favored by a trio from the college, consisting of Oswald Stark, Melbourne Clements and Anna S. Grace, who gave us some excellent musical numbers.

A vote of thanks was tendered the speakers of the evening and also the musicians.

It was nearly 11:30 when the program was concluded. A trifle too long, to be sure, but nevertheless interesting.

The following is the program in full.

PROGRAM

PRESIDING OFFICER,

DR. RAYMOND L. LEONARD, '69

TOASTMASTER,

DR. WILLIAM H. WILDER

Music—"Alma Mater, Honored Rush."

The University.....Prof. John M. Dodson

Music—Trio (a) "Extase".....Louis Gaune

(b) "Pastel Menuet".....H. Paradis

Oswald Stark, Melbourne Clements, Anna S. Grace

The Doctors of the Laws.....Judge Nathaniel C. Sears

Professional Ideals.....Rev. Frank Smith

Music—Violin Solo, "Canzonetta".....d' Ambrosio

Reminiscence of Prof. Daniel Brainard.....Dr. Peter S. Macdonald, '64

The Alumni.....Dr. Charles B. Reed, '87

Music—Cello Solo (a) "Cantabile".....Saint-Saens

(b) "Arlequin".....Popper

The Class of 1910.....Dr. Ralph S. Fisher

Music—"Good Old Rush."

The *Record-Herald* of June 16, 1910, printed the following article apropos of the occasion:

With invitations to two "feeds," at both of which the tables really groaned under the weight of all the good things prepared to tickle the palate, Rev. Frank G. Smith, pastor of the Warren Avenue Congregational Church, went hungry last night.

The preacher was on the program at the annual banquet of the alumni association of Rush Medical College at the Auditorium Hotel, and was also scheduled to officiate at a wedding on the West Side. Just as the banqueters were ready to begin the demolition of the viands at the hotel it was necessary for Dr. Smith to leave for the home where he was to make two hearts beat as one.

When the ceremony was performed he was asked, of course, to stay and share in the wedding feast. With a longing glance at the array of food on the table he pleaded the other engagement and returned to the Auditorium, to find that the material feast had been supplanted by one of reason.

"I guess I'll have to tackle a chop suey joint," he said as he told the doctors the story.

[As a sequel to this it might be stated that Dr. Smith was not obliged to go "hungry to bed," but was amply banqueted in the Auditorium Restaurant at the close of the program.—ED.]

COLLEGE NOTES

OCCUPANTS OF INTERNSHIPS, 1910

The following students have secured internships by examination and appointment, during the year. The duration of service of these internships varies from one to two years:

- R. H. Smith, Akron City Hospital, Akron, Ohio.
- L. Rees, Central Utah Hospital, Mount Pleasant, Utah.
- C. C. Tellesen, Chicago Polyclinic.
- I. Perrill, Chicago Polyclinic.
- J. Gonzalez, Children's Free Hospital, Milwaukee, Wis.
- W. G. McKay, Children's Memorial Hospital.
- R. O. Ritter, Children's Memorial Hospital.
- A. M. Shaw, Children's Memorial Hospital.
- J. E. Mavros, Columbus Hospital.
- F. C. McLean, Cook County Hospital.
- D. D. Todd, Cook County Hospital.
- R. B. Dillehunt, Cook County Hospital.
- C. A. Penman, Cook County Hospital.
- H. Harriet Stevens, Cook County Hospital.
- E. S. Talbot, Jr., Cook County Hospital.
- E. Z. Shapiro, Cook County Hospital.
- F. H. Falls, Cook County Hospital.

D. P. Abbott, Cook County Hospital.
J. H. Skiles, Cook County Hospital.
J. B. Moore, Cook County Hospital.
M. Clements, Cook County Hospital.
C. F. Charlton, Cook County Hospital.
A. C. Pearman, Cook County Hospital.
J. L. Treacy, Cook County Hospital.
S. Walker, Cook County Hospital.
C. E. Smith, Cook County Hospital.
E. L. Cornell, Cook County Hospital.
R. B. Fowler, Cook County Hospital.
C. C. Hickman, Cook County Hospital.
G. M. Crabb, Cook County Hospital.
J. G. Strohm, Cook County Hospital.
J. F. McKie, Cook County Hospital.
F. H. Hanus, Cook County Hospital.
Martha A. Welpton, Denver City and County Hospital, Denver, Colo.
Robert Orlando Ritter, German Hospital.
Emile Reese, German Hospital.
H. R. Hatch, Holy Cross Hospital, Salt Lake City, Utah.
R. E. Miltenberger, House of Correction Hospital.
F. C. Murrah, House of Correction Hospital.
N. B. Wagner, House of Correction Hospital.
C. E. Smith, Illinois Eye and Ear Infirmary.
Sydney Walker, Illinois Eye and Ear Infirmary.
I. Abadir, Kasr il Ainy Hospital, Cairo, Egypt.
D. Delap, Kansas City General Hospital, Kansas City, Mo.
C. D. Enfield, Kansas City General Hospital, Kansas City, Mo.
F. E. Stanton, Kansas City General Hospital, Kansas City, Mo.
E. S. Porter, Kansas City General Hospital, Kansas City, Mo.
C. A. Johnson, Kansas City General Hospital, Kansas City, Mo.
A. M. Shaw, Kansas City General Hospital, Kansas City, Mo.
A. Z. Tanner, Latter Day Saints Hospital, Salt Lake City, Utah.
A. E. Brimmer, Minneapolis City Hospital, Minneapolis, Minn.
R. T. Gilchrist, Milwaukee County Hospital, Milwaukee, Wis.
J. E. Lackner, Michael Reese Hospital.
H. A. Lyding, Michael Reese Hospital.
J. T. Rooks, Passavant Hospital.
J. F. Hammond, Presbyterian Hospital.
J. L. Treacy, Presbyterian Hospital.
E. S. Edgerton, Presbyterian Hospital.
J. T. Strawn, Presbyterian Hospital.
G. G. Steele, Presbyterian Hospital.
G. H. Twining, Presbyterian Hospital.
J. G. Ryan, Presbyterian Hospital.
E. G. Kirk, Presbyterian Hospital.
A. M. Moody, Presbyterian Hospital.
F. B. Olentine, St. Anthony's Hospital.
A. N. Kitenplon, St. Charles Hospital, Aurora, Ill.
A. B. Bauer, St. Joseph's Hospital.
A. B. Baugher, St. Luke's Hospital.

J. E. Ekstrom, St. Luke's Hospital.
 A. N. Aitken, St. Luke's Hospital.
 C. H. Swift, St. Luke's Hosuital.
 L. M. Munson, St. Luke's Hospital.
 H. R. Hoffman, St. Luke's Hospital.
 W. H. Jamieson, St. Luke's Hospital.
 G. B. Schwachtgen, St. Luke's Hospital.
 F. O. McFarland, St. Luke's Hospital.
 E. F. Zoerb, St. Mark's Hospital, Salt Lake City, Utah.
 E. P. Moser, St. Mary's Hospital, Rochester, Minn.
 C. F. Hartman, St. Vincent's Hospital, Toledo, Ohio.
 W. W. Peter, St. Vincent's Hospital, Toledo, Ohio.
 R. E. Flynn, St. Francis Hospital, La Crosse, Wis.

CLINICS, HOSPITALS AND SOCIETIES

For the benefit of the members of the Alumni Association visiting Chicago, a list of Rush clinics is herewith appended. In addition thereto is given a list of some of the principal hospitals in the city, as well as the means by which they are reached, and the hours of their public clinics.

THE BULLETIN wishes to be perfectly impartial in this respect, giving not only information which directly concerns Rush Medical College, but any information which may be of interest to visiting Alumni. It will be glad at any time to furnish upon application further information regarding any clinic in Chicago.

CLINICS—RUSH MEDICAL COLLEGE

SUMMER QUARTER

MONDAY.

9:00-11:00—Medicine.....Assistant Professor Jacque
 11:00- 1:00—Surgery.....Professor Bevan or Assistant
 2:00- 4:00—Skin.....Assistant Professor Anthony
 2:00- 4:00—Ear.....Dr. F. I. Brown
 3:00- 4:00—Eye.....Dr. J. B. Ellis
 4:00- 6:00—Genito-urinary.....Professor Belfield or Dr. Herbst

TUESDAY.

9:00-11:00—Medicine.....Dr. E. E. Irons
 9:00-11:00—Pediatrics.....Professor Cotton or Professor Dodson
 11:00- 1:00—Surgery.....Professor Bevan or Assistant

WEDNESDAY.

9:00-11:00—Medicine.....Assistant Professor Bassoe
 11:00- 1:00—Gynecology.....Asst. Prof. Keyes or Asst. Prof. Lynch
 2:00- 4:00—Throat and Nose.....Assistant Professor Kenyon

THURSDAY.

9:00-11:00—Medicine.....Assistant Professor Jacque
 11:00- 1:00—Surgery.....Professor Bevan or Assistant
 2:00- 4:00—Skin.....Assistant Professor Anthony

FRIDAY.

9:00-11:00—Medicine.....Dr. E. E. Irons
 9:00-11:00—Pediatrics.....Professor Cotton or Professor Dodson
 11:00- 1:00—Surgery.....Professor Bevan or Assistant
 3:00- 4:00—Eye.....Dr. J. B. Ellis
 4:00- 6:00—Genito-urinary.....Professor Belfield or Dr. Herbst

SATURDAY.

9:00-11:00—Medicine.....Assistant Professor Bassoe
 11:00- 1:00—Gynecology.....Asst. Prof. Keyes or Asst. Prof. Lynch
 2:00- 4:00—Surgery.....Professor Graham

HOSPITALS

AUGUSTANA—Lincoln Avenue and Cleveland Avenue.

Take Lincoln Avenue car to Cleveland Avenue. Dr. Ochsner's surgical clinic daily, beginning at 7:45 a. m.

CHICAGO POLICLINIC—174 East Chicago Avenue.

Take Northwestern Elevated train to Chicago Avenue station; or Wells Street car to Chicago Avenue, and walk one-half block west. Clinics all day, from 9 a. m. to 6 p. m., in all branches.

COOK COUNTY—Harrison and Honore Streets.

Harrison Street car direct to entrance. Van Buren Street car to Honore, two blocks south. Metropolitan Elevated (Garfield Park) to Ogden Avenue. Clinics: See special schedule.

ILLINOIS CHARITABLE EYE AND EAR INFIRMARY—227 West Adams Street.

Take Harrison (via Center) Street car to Peoria Street; or Madison Street car to Peoria Street and walk two blocks south. Clinics daily, from 1:30 to 3 p. m.

MERCY HOSPITAL—Calumet Avenue and Twenty-sixth Street.

Take Indiana Avenue car to Twenty-sixth Street, walk two blocks east; or Cottage Grove Avenue car to Twenty-sixth Street, walk two blocks west. Clinics: Wednesday and Saturday at 9 a. m., Surgery; Monday and Thursday at 8 a. m., Surgery; Tuesday and Thursday, from 10 a. m. to 12 m., Medicine.

MICHAEL REESE—Twenty-ninth Street and Groveland Avenue.

Take Cottage Grove Avenue car to Twenty-ninth Street and walk one block east. No special clinics, but hospital always open to doctors.

POST-GRADUATE SCHOOL—2400 Dearborn Street.

Take State Street car to Twenty-fourth Street, walk one block west; or South Side Elevated to Twenty-second Street, walk one block west and two south. Clinics all day, from 8:30 a. m. to 5:30 p. m., in all branches.

PRESBYTERIAN—Corner Congress and Wood Streets.

Take Harrison Street car to Wood Street; or Van Buren Street car to Wood Street and walk one block south. Clinics: See Rush.

ST. LUKE'S—1439 Michigan Avenue.

Take any car on Wabash Avenue to Fourteenth Street, walk one block east and one-half block south. Clinics: Wednesday, 9 a. m. to 12 m., Gynecology; Thursday, 8 to 10 a. m., Surgery; Thursday, 2 to 5 p. m., Eye and Ear. Clinics variable.

WESLEY—2440 Dearborn Street.

Take State Street car to Twenty-fifth Street and walk one block west. Clinics: Tuesday, 8 a. m., Gynecology; Tuesday, 4 p. m., Surgery; Wednesday, 8 a. m., Medicine; Thursday, 4 p. m., Surgery; Friday, 10 a. m., Nose and Throat; Saturday, 9 a. m., Surgery.

ALUMNI NOTES

Mr. and Mrs. Thomas Swain Brigham announce the marriage of their daughter, Sylvia Swain, and Dr. Pliny Henry Perkins ('97), on Saturday, June 4, 1910, Colorado Springs, Colo.

Dr. C. A. Shaw, '97, is located at St. Martin, Dutch West Indies, as government physician.

REUNION OF THE CLASS OF 1900

Thirty members of the Class of 1900 responded to an invitation to hold a tenth anniversary on the night of June 13, 1910, at the Union Restaurant. From the demeanor of a majority of those present one might easily get the impression that it was a first anniversary, and that the strenuous first year of actual practice had in no wise dampened the student ardor for fun.

Dr. C. v. Bachele acted as toastmaster, although the services of such an officer were rather superfluous, in view of the fact that various speakers, consisting of members of the class, were introduced by about everyone present. The "asides" preceding, during and after each successive speaker, were such as to keep all in a continuous uproar of laughter. McDaniels told some very interesting things about Siam; and innumerable stories, not to be published, were told by the others present.

The menu was splendid, and altogether the affair was a "howling" success, in so far as complete relaxation and innocent abandon is concerned.

IN MEMORIAM

Following almost immediately upon the election of our alumnus, Dr. J. W. Tope, of Oak Park, Ill., as president of the Association, we are shocked by the news of his death.

Dr. Tope was one of our older alumni, having graduated with the Class of 1870, 40 years ago. It was indeed unfortunate that he was

not permitted to live to enjoy the new honor conferred upon him, particularly since he appreciated it so highly, as we are informed by his son. His prolonged illness prevented him from being present at the banquet, but the fact that he was elected to the highest office in the Association, certainly goes to show that his name was uppermost in the minds of his fellow alumni.

The following brief biography appeared in the *Tribune* of June 19, 1910:

Dr. John Wesley Tope, founder of the Oak Park Hospital and president of the medical staff, died yesterday after an illness of six months. He was 65 years old. He was born on a farm near New Philadelphia, Ohio. At the age of 15 he ran away to join the United States army and served throughout the civil war. He entered Rush Medical College in 1868, graduating with honors in 1870. The following year he served as interne at the Cook County Hospital and for five years was superintendent of the Dunning insane asylum. Last Thursday he was elected president of Rush Medical College Alumni Association, and also holds the office of president of the Aux Plaines branch of the Chicago Medical Society. He was a thirty-third degree Mason. Dr. Tope is survived by his widow and two sons, Dr. John W. Tope, Jr., and Oliver Tope.

Dr. William R. Lewis, 1874, of Oak Park, was appointed as chairman of a committee of alumni to represent the Association at the funeral.

The following resolutions were adopted at a meeting of the officers of the Association, and the Secretary instructed to send a copy to the surviving members of his family:

WHEREAS, We have learned with deep sorrow and regret of the death of our worthy brother alumnus, Dr. John W. Tope, of the class of 1870 and president of the Alumni Association of Rush Medical College; and

WHEREAS, We are thus deprived of the valuable services and counsel of one whom we have just chosen as president; therefore, be it

Resolved, That we, as individuals and as an association, express our heartfelt sympathy with his widow and children in their great bereavement; also be it

Resolved, That these resolutions be spread upon the records of the Association, and that a copy of them be transmitted to his family.

DR. JOHN M. DODSON,
DR. JOHN EDWIN RHODES,
DR. B. M. LINNELL,
DR. GEORGE H. WEAVER,
DR. ALFRED N. MURRAY, Secretary.

Committee.

CORRESPONDENCE

Dr. R. A. McIlhenny, 1891, asks if the members of his class will hold a reunion next year.

As is the case with all class reunions, this rests entirely with the individual members of the class, although the Association and the college will gladly be of any assistance possible where actual expense to them is not involved.

Since a little fire of enthusiasm has been started in matters pertaining to the Association, THE BULLETIN would suggest that not only Dr. McIlhenny, but all other true-hearted alumni, agitate this matter of class reunions, and thus assist in stimulating alumni fellowship and the growth of the Association.

RUSH MEDICAL COLLEGE LIBRARY

The Faculty of Rush Medical College beg to acknowledge with thanks the receipt of the following gifts presented to the library:

- American Academy of Ophthalmology and Oto-Laryngology, 1 volume.
- American Laryngological, Rhinological and Otological Society, 1 volume.
- Armour & Co., Chicago, 173 journals.
- Association of Military Surgeons, 1 volume.
- Bryant, Dr. W. S., New York City, 11 reprints.
- Carnegie Foundation for the Advancement of Teaching, 1 volume.
- Coughlin, Dr. R. E., Brooklyn, N. Y., 2 reprints.
- Dryden, Mr. J. F., Newark, N. J., 1 volume.
- Eye, Ear, Nose and Throat Hospital, New Orleans, 1 pamphlet.
- German Hospital and Dispensary, New York City, 1 reprint.
- Graham, Dr. D. W., '66, Chicago, 48 journals, 3 reprints, 1 pamphlet.
- Grosvenor, Dr. L. N., '03, Chicago, 13 journals, 23 reprints, 1 volume.
- Haines, Dr. W. S., Chicago, 164 journals, 48 reprints, 12 volumes.
- Hayman, Dr. L. B., '86, Chicago, 73 volumes.
- Hektoen, Dr. L., Chicago, 12 journals, 151 reprints, 4 volumes.
- Jacobi, Dr. A., New York City, 8 volumes, 1 reprint.
- Keyes, Dr. A. B., Chicago, 2 reprints.
- LeCount, Dr. E. R., '92, Chicago, 2 volumes, 8 journals, 7 reprints.
- Leonard, Dr. R. L., '69, Chicago, 1 volume. "Pharmacopoeia Batenna: or Bate's Dispensatory. Translated from the Second Edition of the Latin Copy, by Williams Salmon, 1694."
- Linnell, Dr. B. M., '93, Chicago, 2 volumes, 1 reprint, 158 journals.
- Lutz, Dr. F. J., St. Louis, 2 reprints.
- Luzerne County Medical Society, Wilkesbarre, Pa., 1 volume.
- Manhattan Eye, Ear and Throat Hospital, New York City, 1 volume.
- Pederson, Dr. J., New York City, 10 reprints.
- Quigley, Dr. D. T., '02, North Platte, Neb., 4 reprints.
- Rhodes, Dr. J. E., '86, Chicago, 10 volumes, 23 reprints, 157 journals.
- Rush Medical College, Chicago, 2 volumes, 1 pamphlet.
- Sonnenschein, Dr. R., '01, Chicago, 11 volumes.
- Thompson, Dr. W. G., New York City, 1 reprint.
- U. S. Treasury Department, Washington, D. C., 1 pamphlet.
- Wainwright, Dr. J. W., New York City, 1 volume.
- Weaver, Dr. G. H., '89, Chicago, 110 reprints, 9 pamphlets, 13 journals.

A LITTLE HUMOR NOW AND THEN

The following are some of the interesting letters received by the college:

July 28, 1900.

Rush Medical College Gentlemen

For the good of Science -Left hand-

Brevity.

I broke my right arm the other day above elbow. Had best D'r set it. Says its going to take 10 weeks. Is the electrical fraternity ahead of those who try to assist nature? They weld Ry rails quickly. Why can't a bone be knitted as well?

Perhaps you have never given this subject your thought. As is well known static electricity goes on the outside of a conductor. Direct or alternating will follow the nerves. The bone being phosphate is not affected by the current. The X Ray will penetrate the bone. It is subject for consideration by your electrical chemist. I am of the opinion a chemical cementing phosphate through ether will answer the purpose. I would suggest the chemical be placed upon a screen for trial. Can come over and be a subject for the good of the cause any day you say.

Yrs Respy

Trust your college will have the honor of perfecting this. It can be done and I am willing to lend my 30 years electrical experience and my arm for your assistance.

Rush Medical College Chicago Ill

Dear Sir i have got a mad stone and i was wanting to know if i cod sell it to aney wone of you Doctors or not the stone is three inches long and two inches wid and the color of dear fluch it has been tested on hidoporby wone case and on the bite of a snake i wod lick to hear from you
yours very truly

Prof. Rush Medical College

Sear Sir:—Many years ago I made a contract with Dr., a graduate of your college 40 or 50 years ago, that in the event of my death before him, he was desect and articulate my remains, and afterwards my skeleton should become a part of your museum of anatomy all of which he explained to me. As the Doctor died about 3 yrs ago in I wish to make you this offer that you will, after my death examine my brain which is *peculiar* also my heart and then to have my remains cremated and the ashes placed on the grave of my beloved wife who died one week ago.

I desire that my remains shall be preserved from any *indignities*. That my name shall not be known nor published. And that no female students shall work over me. I should be very glad to have a personal interview with you and could tell you more and better than I could write. If this meets with your approval please answer this without delay.

To the Rush Medical College

Dear Sir I thought I would rite you a letter in regards to my hand I had all my fingers and thumb cutt off and I want to know if I can git a Nother hand and grafted on to me So that I will have some use of it It Looks Like to me that it could bee done if you think it can be done you have got a job I will let you go to work on me I got cutt on the first of July. I have thought of this lots of times. It looks to me like it could bee done I will give you a drawing of my hand how I got cutt to show you if you can do this How much will it cost. The Medical College has Bin Recommended to me. Hoping to here from you real soon

Yours Truly



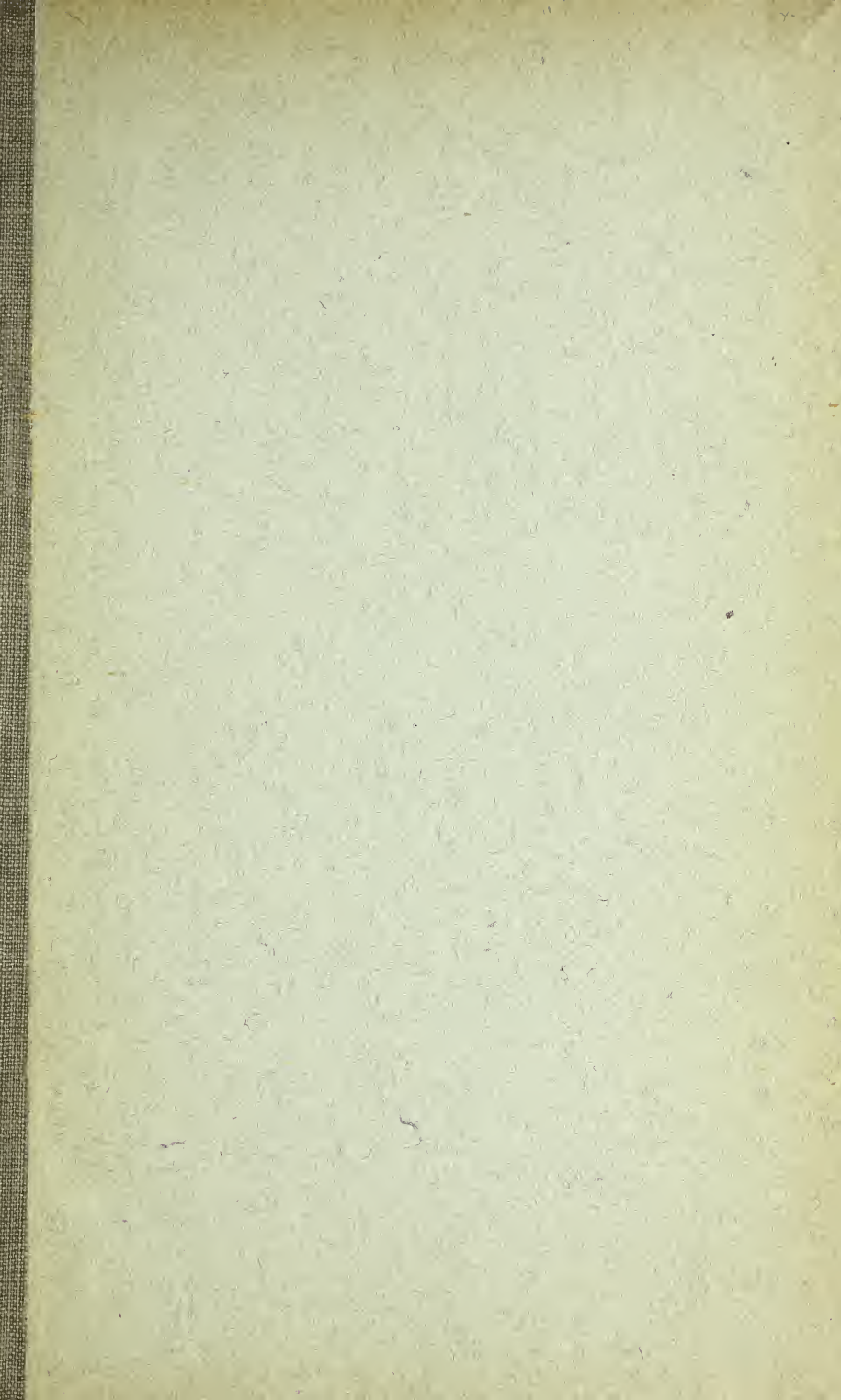
RUSH MEDICAL COLLEGE AND SENN HALL

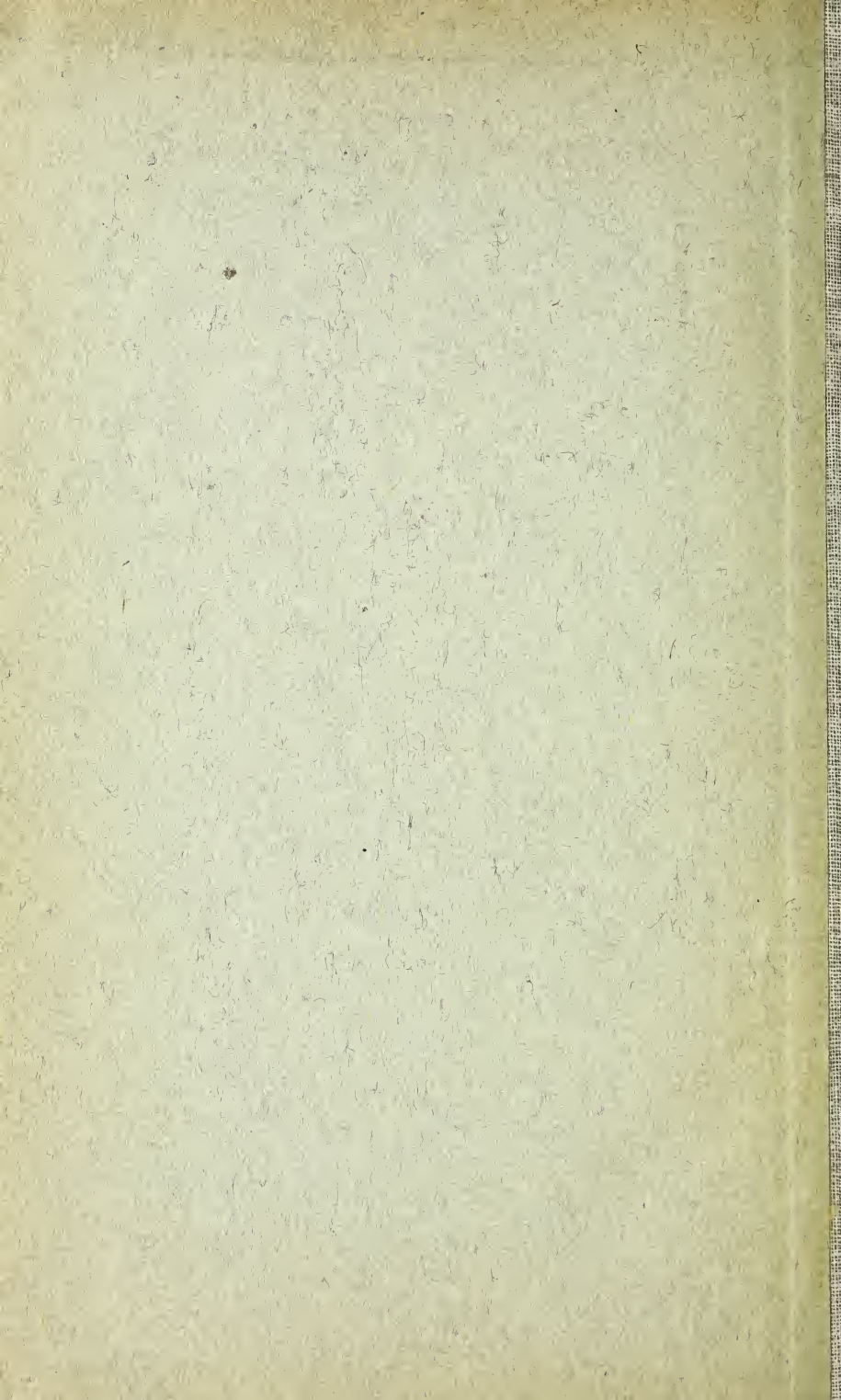


LABORATORY



PRESBYTERIAN HOSPITAL





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